REASON FOR THIS TRANSMITTAL

Federal Law or Regulation

Court Order or Settlement

Clarification Requested by

One or More Counties

State Law Change

Change

Agreement

Initiated by CDSS

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[X]

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



December 6, 2001

ALL COUNTY INFORMATION NOTICE I -104 -01

TO: COUNTY WELFARE DIRECTORS
AUDITORS
ADMINISTRATIVE SERVICES OFFICERS
DISTRICT ATTORNEYS
MENTAL HEALTH DEPARTMENTS
COUNTY CLERKS
PROBATION DEPARTMENTS
PUBLIC ADOPTION AGENCIES

SUBJECT:	2001	COUNTY	FORMS	CATALOG

REFERENCE:

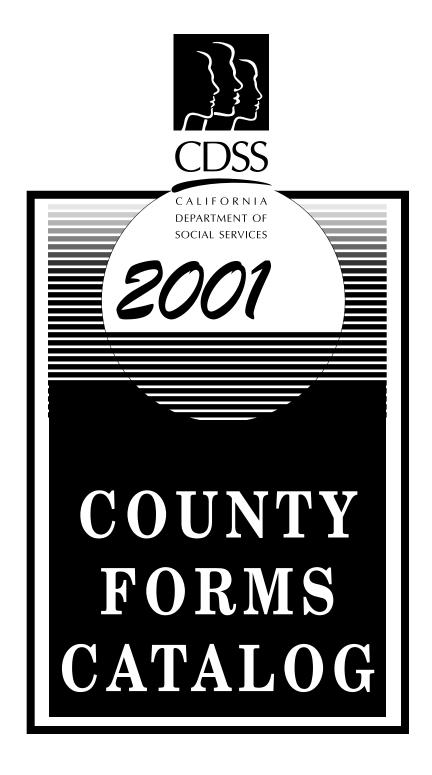
The California Department of Social Services (CDSS) is pleased to announce that the 2001 County Forms Catalog (PUB 69) is available on the Internet and paper copies will continue to be available only through special arrangement. Effective December 1, 2001, an electronic version of the County Forms Catalog is available in Adobe Acrobat® PDF format on the CDSS World Wide Web server at: http://www.dss.cahwnet.gov/cdssweb/On-lineFor_271.htm. A copy of the GEN 727B, County Forms Order, can also be found at this Web location.

To accommodate agencies or individuals without Internet access, copies of the County Forms Catalog will continue to be made available by contacting and making arrangements with the Forms Management Unit at (916) 657-1907.

The catalog includes all forms and numbered publications available for order by County Welfare Departments and other Agencies, through the CDSS Warehouse. Revision date references reflect Notice of Forms Change Numbers 00-001 thru 00-215 and 01-001 thru 01-234. All unit prices quoted are effective December 1, 2001, and will remain in effect until further notice.

Please read the catalog preface, which contains all current ordering procedures. If you have any questions, contact the CDSS Warehouse, at (916) 371-1974.

GLORIA MERK Deputy Director Administration Division



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ORDERING INSTRUCTIONS

All forms orders must be submitted on a County Forms Order (GEN 727B). Detailed instructions are shown on the reverse side of the form. Whenever possible, consolidate orders until all lines of the Forms Order are filled and limit your order to a three-month supply of each item.

The California Department of Social Services (CDSS) has both free and sold forms. Forms which must be purchased by the counties are indicated as such, and the cost is shown in the far right column. Free/sold forms and numbered publications may be placed on the same order.

The prices shown in the catalog have been computed to allow CDSS to recover printing and administrative costs.

Send your orders to:

California Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788

Forms orders specifying revision dates prior to the most recent printing will be shipped by the CDSS Warehouse provided the older revision is still available. These valid forms, bearing older revision dates, will not be accepted back by the Warehouse in exchange for the latest revision.

Orders may be reduced at the discretion of the Warehouse, depending upon the level of stock available.

For information on ordering forms not listed in this catalog, please contact the CDSS Forms Management Unit, at (916) 657-1907, ATSS 437-1907, or by electronic mail at: fmu@dss.ca.gov.

CAMERA-READY COPY

Camera-ready copies may be requested by counties currently printing their own supplies.

Check on the Internet to see if forms are available at www.dss.cahwnet.gov.

Requests can be made by contacting the Forms Management Unit, at (916) 657-1907, ATSS 437-1907, or by electronic mail at: fmu@dss.ca.gov.

BACK-ORDER PROCEDURE

Backordered forms will be noted on the copy of the GEN 727B returned to you. A duplicate copy of the order will be retained by the CDSS Warehouse and the order will be shipped when stock becomes available. **Do not reorder backordered forms. You may receive and be billed for duplicate shipments**. If the backordered form is one that is sold, counties will be billed in the quarter the order is filled.

Occasionally, orders may be reduced. The balance will not be backordered. If this occurs, it will be indicated on the paperwork returned to you. To obtain the balance, please reorder on another GEN 727B.

SHORTAGES AND DAMAGED DELIVERIES

If an order is short or damaged, please contact the CDSS Warehouse within five (5) working days after receipt of the order and request an adjustment to your invoice for the billing quarter. In the event of damage in transit, CDSS will file a claim against the carrier. The following documents should be forwarded in order to substantiate the claim:

- 1. A copy of the carrier's freight bill or delivery document bearing notation of shortage and/or damage.
- 2. A copy of the carrier's inspection report when issued.
- 3. A signed and dated statement of all pertinent facts concerning the shortage or damage not in the documents identified above,

If stock is defective or ordered in error, contact Shirley Trice at the CDSS Warehouse at (916) 371-1974.

OBSOLETE FORMS

Whenever possible, CDSS keeps obsolete forms to a minimum. If changes in State or Federal legislation/regulation make it necessary to obsolete a form, CDSS will credit CWDs/Agencies for the return of their obsoleted stock.

An official obsoletion notice, sent via the GEN 127 process, will be issued. **Do not return any forms for credit until such notices have been issued.** Follow the instructions below on the return of stock.

RETURN OF STOCK

Credit will be given if the reason for the return of stock is acceptable, such as obsoletion or stock shipped in error by CDSS. Additionally, the stock must be returned in its original condition within 30 days of receipt or the date on the obsoletion notice. The stock must have been ordered within 180 days of the return date, and accompanied by a copy of the original GEN 727B order form. The amount credited will be based on the unit price of the form at the time of purchase and applied to the current quarterly bill. The shipping costs for return of stock must be paid by the county.

LANGUAGE TRANSLATION SERVICES

The purpose of Language Translation Services (LTS) is to provide translated materials and interpreters as mandated by law. Sections 7290-7299.8 (Dymally-Alatorre Bilingual Services Act) of the Government Code were enacted to ensure that non-English speaking persons would not be precluded from utilizing public services because of language barriers. The Act requires that, when 5 percent or more of the people served by a State agency are members of a group who either does not speak English or is unable to effectively communicate in English, the State agency shall make available its information and services in the language of the non-English speaking group.

LTS performs in-house translations of English language documents into Cambodian, Chinese, Russian, Spanish, and Vietnamese languages. LTS also performs in-house translations of Cambodian, Chinese, Russian, Spanish and Vietnamese documents into the English language.

Many translated forms and messages are available on the Internet. These translations are in Portable Document Format (PDF), which can be viewed using Adobe Acrobat Reader. To access these documents on the Internet, visit the CDSS Web page at: www.dss.cahwnet.gov/getinfo/lsucov.html. The documents you will find here are only a small portion of all the publications translated and distributed by LTS. If you are unable to find the specific form or publication you are looking for, please check back often as new documents are added regularly. For additional information, call (916) 675-3429 or e-mail LTS.

CATEGORIES OF DEPARTMENT DEVELOPED FORMS

The following definitions pertain to the classification of forms listed in this catalog:

Required Form - No Substitute Permitted - Section 23-400.111, Management and Office Procedures - Forms Management

Forms in this category are required and cannot be modified or reconstructed. However, overprinting is permitted.

A form is assigned to this category if: a) the form is legally mandated or federally required; b) uniformity is necessary in the gathering or reporting of data; or, c) the form will be used to communicate information between CWDs/Agencies and some state or federal agency.

Required Form - Substitute with Prior CDSS Approval - Section 23-400.112, Management and Office Procedures - Forms Management

Forms in this category are required forms for which modifications or substitutions are permitted with the prior approval of the California Department of Social Services (CDSS). The CWDs/Agencies may modify these forms to add or obtain information that does not: a) conflict with program policy/regulations; or, b) change the legal content of the form. Ordinarily, rewording the content of a form in this category will not be approved. However, such suggestions for language improvement will be considered by CDSS on future revisions.

A form is assigned to this category if: a) legal or regulatory considerations require only certain content in the form; or, b) uniformity is desirable, but variations in CWD/Agency systems or demographic characteristics require flexibility so the form will be more useful without the need for supplementary forms.

Recommended Forms - Section 23-400.113, Management and Office Procedures - Forms Management

Forms in this category are recommended forms that CWDs/Agencies may modify without prior CDSS approval or may opt not to use. A form is assigned to this category if: a) it is used within the internal operation (not for client use) of the CWD/Agency with no specific use or reference required by CDSS; b) it is a referral of verification form used within the CWD/Agency not requiring uniformity or specific interagency coordination, and not legally mandated; or, c) it is a model or experimental form being tested in CWDs/Agencies prior to release for general use.

PROGRAM CONTACT

A program contact is indicated next to each form listed. You should contact that office about questions concerning the use of the form, suggestions for changes and improvements, and approvals of substitute county forms. Send inquiries to the attention of the program contact at:

California Department of Social Services P.O. Box 944243 Sacramento, CA 94244-2430

NOTICE OF FORM CHANGE - GEN 127

The CWD/Agencies will be notified of new, revised, and obsoleted forms through Form GEN 127, "Notice of Form Change", process. The notice will contain information regarding the following:

- Order unit and price;
- Information on whether previous versions can continue to be used or shall be removed from future use;
- Effective dates to use new forms;
- References to manual sections and All-County correspondence containing instructions and policy regarding the new form, if applicable.
- Obsolete forms, or advance notice of forms to be obsoleted in the future.

CWDs/Agencies should use the Notice of Form Change to update their County Forms Catalog.

The notices are numbered in sequence within calendar years (e.g., 01-001). Counties can obtain missing notices by contacting the California Department of Social Services Forms Management Unit at (916) 657-1907, or by electronic mail at: fmu@dss.ca.gov.

UNIT OF ISSUE ABBREVIATIONS

BD - Band PD - Pad
BDL - Bundle SE - Set
CTN - Carton SH - Sheet
EA - Each

PUBLICATIONS

Publications (PUBs) are listed in the forms catalog and should be ordered on the County Forms Order (GEN 727B).

Requests for other publications such as manuals, manual letters, All-County Letters, and **ALL** County Information Notices not listed in the catalog should be ordered on GEN 387A, Request for Publications. Requests and inquiries regarding these items should be sent to:

California Department of Social Services Attention: Publication Unit P.O. Box 980788 West Sacramento, CA 95798-0788

REPRODUCTION AND DISTRIBUTION OF

ADMINISTRATIVE EXPENSE CLAIM FORMS

Effective July 1, 1997, the State of California Automated Template (SOCAT) is the automated version of the administrative expense claim (AEC) which is maintained by the County systems Unit within the Fiscal Systems and Accounting Branch. The County systems Unit updates SOCAT to coincide with the quarterly time study and claiming instructions issued by the Fiscal Policy Bureau. A copy of the SOCAT is transferred onto a diskette and mailed to each county on a quarterly basis. The SOCAT allows counties to prepare and submit their claim on a diskette and to print hard copies of the claim.

In the past, manual claim pages were produced by CDSS for those counties which had not yet been automated. Since all counties now are fully automated, they are able to produce their own hard copies of the claim and no longer need the manual pages. Essentially, we have moved to a paperless system.

If you have any questions, please call (916) 654-0645.

DFA 7A	DFA 325.1B	DFA 327.2D
DFA 7B	DFA 325.1C	DFA 327.3A
DFA 47	DFA 325.1E	DFA 327.3B
DFA 53	DFA 325.5	DFA 327.3C
DFA 323	DFA 327.1A	DFA 327.3D
DFA 403	DFA 327.1B	DFA 327.4A
DFA 419	DFA 327.1C	DFA 327.4B
DFA 879	DFA 327.1D	DFA 327.4D
DFA 325.1	DFA 327.2A	DFA 327.5A
DFA 325.1A	DFA 327.2B	DFA 327.5B
DFA 325.1AA	DFA 327.2C	DFA 327.5D

STATE OF CALIFORNIA
HEALTH AND HUMAN SERVICES AGENCY
CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

REQUEST FOR PUBLICATIONS

- Submit original and 2 copies to Publications Unit, CDSS Warehouse, P.O. Box 980788, West Sacramento, CA 95798-0788.
- Division and/or sections of manuals will not be issued..
- Please specify if revision service is requested.

AMOUNT REQUESTED	MANUALS			REVISION REQUI	I SERVICE ESTED		SHIP TO		DATE RECEIVED	
REQUESTED	WANDALS			(Check (No	REQUESTOR'S NAME	01111 10		FILLED BY:	DATE:
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	Child Support Program					AGENCY NAME			SHIPPED BY:	DATE
	Staff Development and Training									
	Fiscal Management and Control								PIECES:	WEIGHT:
	Statistical Reports						(0000000			
	Child Welfare Services					ADDRESS (NO.)	(STREET)			
	Social Service Standards					(CITY)	(STATE)	(ZIP CODE)	VIA	B/L
	Eligibility and Assistance Standards (AFDC)									
	Food Stamps Policies and Procedures					TELEPHONE NUMBER				
	Specialized Programs					()				
	Confidentiality, Fraud, Civil Rights, and State He	aring				AMOUNT REQUESTED	OTHER ITEMS			REMARKS
	Deaf Access Program Manual	-				KEQUESTED	OTHER HEMIS			
	Adoptions Users Manual									
	Maternity Home Care									
	CCL TITLE 22 DIVISION'S 6 AND	12		REVISIO	ON SERVICE UESTED					
	(Check appropriate)	Newsprint	Manual	(Check)	(V) One) No					
	General Licensing Requirements									
	Social Rehabilitation Facilities									
	Adult Day Care Facilities									
	Adult Day Support Center									
	Small Family Homes									
	Group Homes									
	Adult Residential Facilities									
	Foster Family Homes									
	Residential Care Facilities for The Elderly									
	Residential Care Facilities for the Chronically ill									
	Foster Family Agencies									
	Adoption Agencies									
	Child Care Centers									
	Family Child Care Homes									
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TO:	CDSS V	Varehouse,	P.O. Bo	x 980788, West Sacramento, CA 9579	98-0788	AGENCY				AGENC	Y, OFFICE OR	SECTION	
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L I N	FO	RM CATALO	OG	TITLE OR CATALOG DES	CRIPTION		QUANTITY WANTED	UNIT OF ISSUE	PRICE PER UNIT OF ISSUE	PRICE PER FORM	PROCESS CODE	TYPE OF OR REGULAR	DER
E	PREFIX	NUMBER	SUFFIX						ISSUE	ORDER	(Over)		
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2												FILLED BY:	DATE:
3												PACKED BY:	DATE:
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GEN 72	27B (4/99)							TOTAL			ADJUST	ED . ¢	

INSTRUCTIONS

- 1. Use this order for forms listed in the county forms catalog.
- 2. Print clearly or type in duplicate.
- 3. Complete all spaces except shaded areas.
- 4. List forms in forms catalog sequence.
- FREE/SOLD forms and numbered publication can be on the same order.
- 6. Make separate line entries (white area) for each form ordered.
- 7. Route original to the Social Services Warehouse. Retain one for a suspense copy.
 - A. Original, warehouse file.
 - B. Suspense Copy.

PROCESS CODE LEGEND

Action taken by the warehouse will be found in the process code column on the front of this order. The following codes explain the action taken on your order.

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- B—Back ordered, will be shipped when available.
- C—Cancelled, item not furnished.
- D—Cannot identify, check forms catalog for form number, or send sample.
- G—Quantity reduced, amount requested appears excessive, please reanalyze usage of this item.
- I—Quantity changed due to packaging.
- K—Quantity reduced; Stock low-reorder when needed.

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SAMPLE ENTRY

PREFIX	NUMBER	SUFFIX	TITLE OR CATALOG DESCRIPTION	QUANTITY OF ISSUE	UNIT OF ISSUE
ABCD	239	А	NOTICE OF PROPOSED ACTION	10	
DFA	285.1	SPAN	INCOME FROM FARM OPER. AND OTHER SELF-EMPL.	5	

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
AAP 1	Request For Adoption Assistance	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 3.44 PD
AAP 1 SP	Request For Adoption Assistance	REQ	Adoptions Recruitment & Community Services Bureau	EA	EACH .03 EA
AAP 2	Payment Instructions Adoption Assistance Program	REQ	Adoptions Recruitment & Community Services Bureau	SE	.09 SE
AAP 3	Recertification Information Adoption Assistance Program	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 3.53 PD
AAP 3 SP	Recertification Information Adoption Assistance Program	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 1.45 PD
AAP 4	Eligibility Certification - Adoption Assistance Program	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 3.04 PD
ABCD 239.7A	Notice of Administrative Disqualification CalWORKs Program	REQ	Fraud Prevention Bureau	МО	MASTER ONLY
ABCD 239.7A SP	Notice of Administrative Disqualification CalWORKs Program	REQ	Fraud Prevention Bureau	МО	MASTER ONLY
ABCD 257	AFDC Applications Disposition Report	REQ	Data Analysis And Publications Branch	МО	MASTER ONLY
ABCD 278L	List Of Authorizations To Start, Change, Or Stop Aid Payments	RSP	Fiscal Policy Bureau	PD	100 SH 5.17 PD
ABCD 278M	Authorization To Start, Change, Or Stop Aid Payments	RSP	Fiscal Policy Bureau	PD	50 SH 1.63 PD
ABCD 350	Annual Recipient Report On AFDC, Social Services, Non Assistance Food Stamps, GAIN, and RCA Ethnic Origin And Primary Language	REQ	Data Analysis And Publications Branch	МО	MASTER ONLY
ABCD 478A	Disqualification Consent Agreement CalWORKs Program	REC	Fraud Prevention Bureau	МО	MASTER ONLY
ABCD 478A SP	Disqualification Consent Agreement CalWORKs Program	REC	Fraud Prevention Bureau	МО	MASTER ONLY
ABCD 801	Aid Payroll (Contra Roll)	RSP	Fiscal Policy Bureau	PD	50 SH FREE
ABCD 801GD	Grant Diversion Employer's Payroll	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
ABCD 820	Reconciliation Statement County Authorizations To Auditor's Payments	REQ	Fiscal Policy Bureau	MO	MASTER ONLY
ABCD 821	Batch Voucher Of Individual County Authorizations	RSP	Fiscal Policy Bureau	МО	MASTER ONLY
ABCD 822	Register Of County Authorizations	RSP	Fiscal Policy Bureau	МО	MASTER ONLY
ABCD 830	Overpayment Receivable Record	RSP	Fiscal Policy Bureau	PD	50 SH 2.01 PD

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
ABCD 831	Repayment Receivable Record	RSP	Fiscal Policy Bureau	EA	.02 EA
ABCD 832	AFDC Exempt Caseload Date Report	REQ	Data Analysis And Publications Branch	МО	MASTER ONLY
ABCDM 228 ENG/SP	Applicant's Authorization For Release of Information	RSP	CalWORKs Eligibility Bureau	PD	100 SH 2.84 PD
ACF 115 COUNTY	Title IV-A Child Care Monthly Statistical Report	REC	Data Analysis And Publications Branch	МО	MASTER ONLY
ACF 115 STATE	Child Care Monthly Statistical Report	REC	Data Analysis And Publications Branch	МО	MASTER ONLY
AD 1A ENG/SP	Consent To Adoption By Parent(s) In California	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 2.85 PD
AD 1C ENG/SP	Consent To Adoption By Parent(s) Outside California	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 3.48 PD
AD 1F	Consent To Adoption By Parent(s) Outside California In Armed Forces	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 4.07 PD
AD 2	Stepparent Adoption consent to Adoption by Parent Retaining	REQ	Adoptions Recruitment & Community Services Bureau	EA	.08 EA
AD 2A	Stepparent Adoption Consent-Giving Custody in California	REQ	Adoptions Recruitment & Community Services Bureau	EA	.04 EA
AD 2B	Stepparent Adoption Consent To Adoption By Parent Outside California Giving Custody To Husband Or Wife Of Other Parent	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 3.20 PD
AD 2D	Stepparent Adoption Consent to Adoption by Parent Outside California in Armed Forces Giving Custody to Husband or Wife of Other Parent	REQ	Adoptions Recruitment & Community Services Bureau	MO	MASTER ONLY
AD 3	Notice Of Pendency Of Action	REC	Adoptions Recruitment & Community Services Bureau	PD	50 SH FREE
AD 8	Marriage Verification	RSP	Adoptions Recruitment & Community Services Bureau	МО	MASTER ONLY
AD 9	Independent Adoption Questionnaire	REC	Adoptions Recruitment & Community Services Bureau	SE	.38 SE
AD 9 SP	Independent Adoption Questionnaire	REC	Adoptions Recruitment & Community Services Bureau	МО	MASTER ONLY

AMOUNT PER ORDER UNIT ORDER REQ PROGRAM FORM TITLE only 100/50 SH per PD or BD unless NUMBER **RSP** CONTACT UNIT **REC** otherwise specified AD 10 Reference Blank For Adoption **REC** Adoptions SE .11 SE Recruitment & Community Services Bureau **AD 10 SP** Reference Blank For Adoption **REC** Adoptions MO MASTER ONLY Recruitment & Community Services Bureau 50 SH 2.82 PD AD 20 ENG/SP Refusal To Give Consent To Adoption REQ Adoptions PD Recruitment & Community Services Bureau AD 20B ENG/SP Refusal To Give Consent To Adoption - Alleged Natural Father REQ Adoptions PD 50 SH Recruitment & 4.04 PD Community Services Bureau AD 22 Health Facility Minor Release Report **REQ** EΑ **FREE** Adoptions Recruitment & Community Services Bureau Adoptions Recruitment & **AD 22 SP** Health Facility Minor Release Report REQ MO MASTER ONLY Community Services Buréau AD 28 Notification Of Subsequent Action REQ Adoptions SE **FREE** Recruitment & Community Services Bureau **REC** PD 100 SH AD 29 **Employment Verification** Adoptions Recruitment & 8.39 PD Community Services Bureau AD 34 Activity Record - Adoption Warehouse Cases **REC** Adoptions MO MASTER ONLY Recruitment & Community Services Bureau AD 40.1 Adoptions Worksheet REQ Adoptions EΑ .04 EA Recruitment & Community Services Bureau Data Systems Relinquishment/Independent Adoption Program **REQ FREE** AD 42AAP AAC EΑ Individual Case Report-AAP/AAC And Survey Design Bureau Data Systems And Survey **AD 42I** Independent Adoption Program Individual Report REQ MO MASTER ONLY Design Bureau AD 42ICA Intercountry Adoption Program Individual Case Report REQ Data Systems MO MASTER ONLY And Survey Design Bureau Relinquishment Adoption Program Individual Case Report REQ Data Systems **FREE AD 42R** EΑ And Survey Design Bureau Applications And Homes Approved For Adoptive Placements Relinquishment Program -Quarterly Statistical Report Data Systems And Survey AD 56A **REQ** MO MASTER ONLY Design Bureau **AD 56E** Services To Other Agencies And Post-Adoption Services **REQ** Data Systems EΑ **FREE** In The Relinquishment And Independent Programs Quarterly And Survey Statistical Report Design Bureau

REC= RECOMMENDED

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
AD 56D	Quarterly Statistical Report On Independent Adoptions	REC	Data Systems And Survey Design Bureau	PD	50 SH FREE
AD 56P	Post-Finalization Adoption Services-Quarterly Report	REQ	DataSystems And Survey Design Bureau	МО	MASTER ONLY
AD 65	Parent's Authorization For Medical And Surgical Care	REC	Adoptions Recruitment & Community Services Bureau	PD	50 SH 1.00 PD
AD 65 SP	Parent's Authorization For Medical And Surgical Care	REC	Adoptions Recruitment & Community Services Bureau	МО	MASTER ONLY
AD 67	Information About The Birth Mother	REQ	Adoptions Recruitment & Community Services Bureau	SE	.15 SE
AD 67 SP	Information About The Birth Mother	RSP	Adoptions Recruitment & Community Services Bureau	МО	MASTER ONLY
AD 67A	Information About The Birth Father	REQ	Adoptions Recruitment & Community Services Bureau	SE	.17 SE
AD 67A SP	Information About The Birth Father	REQ	Adoptions Recruitment & Community Services Bureau	МО	MASTER ONLY
AD 90	Supporting Information For Issuance Of CDSS Acknowledgement & Confirmation Of Receipt of Relinquishment Documents	REQ	Adoptions Community Services Bureau	PD	50 SH 3.06 PD
AD 100 ENG/SP	Authorization For Release Of Information	REC	Adoptions Recruitment & Community Services Bureau	PD	50 SH 3.26 PD
AD 144	Authorization Agreement	REQ	Adoptions Recruitment & Community Services Bureau	MO	MASTER ONLY
AD 165	Consent To Adoption By Parent In California When Legal Father Denies He Is The Natural Father	REQ	Adoptions Recruitment & Community Services Bureau	МО	MASTER ONLY
AD 165 SP	Consent To Adoption By Parent In California When Legal Father Denies He Is The Natural Father	REQ	Adoptions Recruitment & Community Services Bureau	МО	MASTER ONLY
AD 166 ENG/SP	Consent To Adoption By Father Outside California Father Denies He Is The Natural Father	REQ	Adoptions Recruitment & Community Services Bureau	EA	.06 EACH
AD 169	Office And Telephone Interviews	REQ	Adoptions Recruitment & Community Services Bureau	МО	MASTER ONLY

REQ= REQUIRED FORM NO RSP= REQUIRED FORM SUBSTITUTE

CHANGE PERMITTED WITH PRIOR DSS APPROVAL **FORM AMOUNT PER ORDER UNIT** ORDER **FORM** TITLE **REQ PROGRAM** only 100/50 SH per PD or BD unless otherwise specified NUMBER **RSP** CONTACT UNIT **REC** AD 196 Request For Release Of Information REQ Adoptions EΑ .07 EACH Recruitment & Community Services Buréau AD 475A **REC** CalWORKs And Justice For All Poster EΑ **FREE** Eligiblity Bureau Adoptions Recruitment & AD 501 ENG/SP Relinquishment (For Natural Mother And/Or Presumed Father) REQ PD 50SH 4.35 PD Community Services Bureau AD 501A ENG/SP Relinquishment (Out Of State) REQ Adoptions EΑ .03 EACH Recruitment & Community Services Bureau **REQ** AD 503 ENG/SP Relinquishment (Out Of County) Adoptions MO MASTER ONLY Recruitment & Community Services Bureau AD 504 REQ 50 SH Relinquishment - Out Of State In Armed Forces Adoptions PD Recruitment & 4.67 PD Community Services Bureau AD 508 Rescission Request/Rescission Of Relinquishment REQ Adoptions MO MASTER ONLY Recruitment & Community Services Bureau **REQ** AD 508 SP Rescission Request/Rescission Of Relinquishment Adoptions MO MASTER ONLY Recruitment & Community Services Bureau Adoptions Recruitment & AD 512 REQ .04 SE Psychosocial And Medical History SE Community Services Bureau AD 521 PART I Application For Child For Adoption **REC** Adoptions PD 100 SH Recruitment & 5.23 PD Community Services Bureau AD 521 PART I SP MASTER ONLY Application For Child For Adoption **REC** MO Adoptions Recruitment & Community Services Bureau **REC** AD 521 PART II Application For Child For Adoption Adoptions EΑ .12 EA Recruitment & Community Services Bureau AD 521 PART II Application For Child For Adoption **REC** Adoptions MO MASTER ONLY Recruitment & Community Services Bureau RSP .18 SE AD 524 BI Medical Information On Applicants/Petitioners Adoptions SE Recruitment & Community Services Bureau REQ AD 551A Notification Of Procedure In Lieu Of Signing Relinquishment Adoptions PD 50 SH Waiver Or Denial Recruitment & 2.71 PD Community Services Buréau

REC= RECOMMENDED

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
AD 558	Notice Of Placement	REQ	Adoptions Recruitment & Community Services Bureau	PD	100 SH 3.76 PD
AD 580	Notice Of Removal Of Child From Adoptive Home	RSP	Adoptions Recruitment & Community Services Bureau	PD	50 SH 4.99 PD
AD 583 ENG/SP	Relinquishment - Out Of County	REQ	Adoptions Recruitment & Community Services Bureau	MO	MASTER ONLY
AD 584 ENG/SP	Relinquishment (Out Of State-Presumed Father Denies Paternity)	REQ	Adoptions Recruitment & Community Services Bureau	EA	.11 SE
AD 585 ENG/SP	Relinquishment (Presumed Father Denies Paternity)	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 1.44 PD
AD 586 ENG/SP	Relinquishment (Alleged Natural Father In California) (In Or Out Of County)	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 3.90 PD
AD 588 ENG/SP	Denial Of Paternity By Alleged Natural Father (In Or Out Of California)	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 4.36 PD
AD 590 ENG/SP	Waiver Of Right To Further Notice Of Adoption Planning (Alleged Natural Father In Or Out Of California)	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 2.52 PD
AD 591 ENG/SP	Relinquishment-Alleged Natural Father (Out of State Or County)	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 1.18 PD
AD 594 ENG/SP	Consent To Adoption By Alleged Natural Father	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 3.04 PD
AD 800	Certification Adoption Cost Of Care Subvention	RSP	Fiscal Policy Bureau	МО	MASTER ONLY
AD 800A	Summary Report Of Assistance Expenditures Adoption Assistance Program/Federal	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
AD 800B	Summary Report Of Assistance Expenditures-Adoption Assistance Program/Nonfederal (Includes Aid For The Adoption Of Children-ACC)	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
AD 801A	Adoption Cost Of Care Claim Staff Months	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
AD 824	Consent And Joinder To Adoption Reimbursement Program	REC	Adoptions Recruitment & Community Services Bureau	EA	.06 EA
AD 831	Private Adoption Agency Cost Justification For Adoptive Placement	REQ	Adoptions Recruitment & Community Services Bureau	МО	MASTER ONLY

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
AD 836	Report Of Physician Attending Birth Of Child Placed For Adoption	REC	Adoptions Recruitment & Community Services Bureau	МО	MASTER ONLY
AD 842	Consent To Adoptive Placement By Alleged Natural Father (Outside California In Armed Forces)	REQ	Adoptions Recruitment & Community Services Bureau	МО	MASTER ONLY
AD 857	Consent To Adoption Of Indian Child Parent In California	REQ	Adoptions Recruitment & Community Services Bureau	MO	MASTER ONLY
AD 858	Consent To Adoption of Indian Child By Parent(s) In California	RSP	Adoptions Recruitment & Community Services Bureau	MO	MASTER ONLY
AD 859	Consent To Adoption Of Indian Child By Parent(s) Outside California	RSP	Adoptions Recruitment & Community Services Bureau	MO	MASTER ONLY
AD 860	Consent To Adoption Of Indian Child By Father Outside California	REQ	Adoptions Recruitment & Community Services Bureau	MO	MASTER ONLY
AD 861	Consent To Adoptive Placement Of Indian Child By Alleged Natural Father (In Or Out Of California)	REQ	Adoptions Recruitment & Community Services Bureau	MO	MASTER ONLY
AD 862	Relinquishment Of Indian Child By Alleged Natural Father (Out Of State Or Country)	REQ	Adoptions Recruitment & Community Services Bureau	MO	MASTER ONLY
AD 863	Relinquishment Of Indian Child (Out Of State)	REQ	Adoptions Recruitment & Community Services Bureau	MO	MASTER ONLY
AD 864	Relinquishment Of Indian Child	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 1.91 PD
AD 865	Relinquishment Of Indian Child (Out Of County)	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 2.02 PD
AD 866	Relinquishment Of Indian Child (To Be Used When Presumed Father Denies He Is The Natural Father)	REQ	Adoptions Recruitment & Community Services Bureau	МО	MASTER ONLY
AD 867	Relinquishment Of Indian Child Presumed Father Denies He Is The Birth Father Out of State	REQ	Adoptions Recruitment & Community Services Bureau	МО	MASTER ONLY
AD 868	Relinquishment Of Indian Child (Alleged Natural Father In California) (In Or Out Of County)	REQ	Adoptions Recruitment & Community Services Bureau	МО	MASTER ONLY
AD 873	Relinquishment Of Indian Child Presumed Father Denies He is Birth Father Out Of County	REQ	Adoptions Recruitment & Community Services Bureau	МО	MASTER ONLY

REC= RECOMMENDED

AMOUNT PER ORDER UNIT PROGRAM ORDER FORM TITLE **REQ** only 100/50 SH per PD or BD unless **NUMBER RSP** CONTACT UNIT **REC** otherwise specified AD 880 **Declaration Of Mother** REQ Adoptions SE .11 SE Recruitment & Community Services Buréau AD 880 SP **REQ Declaration Of Mother** Adoptions MO MASTER ONLY Recruitment & Community Services Bureau Statement Of Understanding-Relinquishment Adoption Program For Parent Who Gave Physical Custody Of The Child To The Agency AD 885 **REQ** SE .15 SE Adoptions Recruitment & Community Services Buréau AD 885 SP Statement Of Understanding-Relinquishment Adoption Program For **REQ** Adoptions SE .44 SE Parent Who Gave Physical Custody Of The Child To The Agency Recruitment & Community Services Buréau Statement of Understanding-Mother Or A Presumed Father Who Has Been Deprived of Physical Custody Of The Child By Juvenile Court Order And Has Not received Family Maintenance Or Family **REQ** .16 SE AD 885A Adoptions SE Recruitment & Community Services Bureau Reunification Services AD 885A SP Statement of Understanding-Mother Or A Presumed Father Who **REQ** Adoptions SE .11 SE Has Been Deprived of Physical Custody Of The Child By Juvenile Recruitment & Court Order And Has Not received Family Maintenance Or Family Community Reunification Services Services Bureau AD 885C Statement of Understanding Alleged Natural Father Who **REQ** Adoptions SE .36 SE Relinquishes His Child Recruitment & Community Services Bureau Statement of Understanding Alleged Natural Father Who AD 885C SP REQ Adoptions SE .11 SE Recruitment & Relinquishes His Child Community Services Bureau Adoptions Recruitment & AD 885D Statement Of Understanding Agency Adoptions Program **REQ** SE .13 SE Community Services Bureau AD 885D SP Statement Of Understanding Agency Adoptions Program REQ Adoptions SE .14 SE Recruitment & Community Services Bureau AD 887 Statement of Understanding-Parent Who Gave Physical Custody **REQ** Adoptions SE .16 SE Recruitment & Of The Child To Adoptive Parents Community Services Bureau AD 887 SP Statement of Understanding-Parent Who Gave Physical Custody **REQ** Adoptions SE .23 SE Of The Child To Adoptive Parents Recruitment & Community Services Bureau AD 887A Statement Of Understanding-Parent Who Did Not Give Physical **REQ** Adoptions SE .15 SE Custody Of The Child To The Adoptive Parents Recruitment & Community Services Bureau Statement Of Understanding-Parent Who Did Not Give Physical Custody Of The Child To The Adoptive Parents AD 887A SP **REQ** Adoptions SE .15 SE Recruitment & Community Services Bureau AD 887B Statement Of Understanding Independent Adoption Program **REQ** Adoptions SE .14 SE Recruitment & Alleged Natural Father Community Services Bureau

REC= RECOMMENDED

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
AD 887B SP	Statement of Understanding-Independent Adoption Program Alleged Natural Father	REQ	Adoptions Recruitment & Community Services Bureau	SE	.33 SE
AD 899	Statement of Understanding-Relinquishment Statement Of Understanding For The Parent Of An Indian Child	REQ	Adoptions Recruitment & Community Services Bureau	SE	.26 SE
AD 899 SP	Statement of Understanding-Relinquishment Statement Of Understanding For The Parent Of An Indian Child	REQ	Adoptions Recruitment & Community Services Bureau	SE	.13 SE
AD 899A	Statement of Understanding-Mother Or Presumed Father Who Has Been Deprived Of Physical Custody	REQ	Adoptions Recruitment & Community Services Bureau	SE	.31 SE
AD 899A SP	Statement of Understanding-Mother Or Presumed Father Who Has Been Deprived Of Physical Custody	REQ	Adoptions Recruitment & Community Services Bureau	SE	.13 SE
AD 899B	Statement Of Understanding For The Parent Of An Indian Child Relinquishment Adoption Program	REC	Adoptions Recruitment & Community Services Bureau	SE	.29 SE
AD 899C	Statement Of Understanding-Alleged Natural Father Who Relinquishes His Child And Whose Child Is Subject To The Indian Child Welfare Act	REQ	Adoptions Recruitment & Community Services Bureau	SE	.18 SE
AD 899C SP	Statement Of Understanding-Alleged Natural Father Who Relinquishes His Child And Whose Child Is Subject To The Indian Child Welfare Act	REQ	Adoptions Recruitment & Community Services Bureau	SE	.12 SE
AD 899D	Statement ding Agency Adoptions Program	REQ	Adoptions Recruitment & Community Services Bureau	SE	.13 SE
AD 899D SP	Statement ding Agency Adoptions Program	REQ	Adoptions Recruitment & Community Services Bureau	SE	.22 SE
AD 900	Statement of Understanding Independent Adoptions Program Parent Who Gave Physical Custody Of The Indian Child To The Adoptive Parent	REQ	Adoptions Recruitment & Community Services Bureau	SE	.33 SE
AD 900A	Statement Of Understanding-Parent Who Did Not Give Physical Custody Of The Indian Child To The Adoptive Parents	REQ	Adoptions Recruitment & Community Services Bureau	SE	.36 SE
AD 900B	Statement of Understanding For The Alleged Natural Father Of An Indian Child	REQ	Adoptions Recruitment & Community Services Bureau	SE	.39 SE
AD 904	Consent for Contact	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 1.79 PD
AD 904 SP	Consent for Contact	REQ	Adoptions Recruitment & Community Services Bureau	МО	MASTER ONLY

AMOUNT PER ORDER UNIT ORDER **TITLE REQ PROGRAM FORM** only 100/50 SH per PD or BD unless NUMBER **RSP** CONTACT UNIT **REC** otherwise specified AD 904A Waiver Of Rights To Confidentiality Of Adoption Records For **REQ** Adoptions PD 50 SH Siblings Recruitment & 3.22 PD Community Services Buréau REQ **AD 904A SP** Waiver Of Rights To Confidentiality Of Adoption Records For MO MASTER ONLY Adoptions Recruitment & Siblings Community Services Bureau AD 907 Adoptive Placement Agreement **RSP** Adoptions PD 50 SH Recruitment & 1.98 PD Community Services Buréau AD 907 SP Adoptive Placement Agreement **RSP** Adoptions MO MASTER ONLY Recruitment & Community Services Buréau RSP AD 908 ENG/SP .04 EA Adoptions Information Act Statement Adoptions EΑ Recruitment & Community Services Bureau Adoptions Recruitment & AD 909 Photo Listing Data Sheet REQ EΑ .05 EA Community Services Buréau AD 914 Nonrecurring Adoption Expense Reimbursement Program Claim **REC** Adoptions PD 50 SH Recruitment & **FREE** Community Services Buréau REC AD 917 Adoption Information Sheet Adoptions SE **FREE** Recruitment & Community Services Bureau AD 918 **REC** Adoptions SE **FREE** Adoption Questionnaire II Recruitment & Community Services Buréau AD 918 SP Adoption Questionnaire II **REC** Adoptions SE **FREE** Recruitment & Community Services Buréau **REC** PD 50 SH AD 920 ENG/SP Relinquishment (Alleged Natural Father in California) Adoptions 2.38 PD Recruitment & Community Services Bureau Adoptions Recruitment & RSP AD 921 ENG/SP Relinquishment (Birth Mother and/or Presumed Father) PD 50 SH 1.46 PD Community Services Buréau AD 922 ENG/SP Relinquishment Addendum **REC** Adoptions EΑ .15 EA Recruitment & Community Services Buréau 50 SH AD 924 REQ PD Independent Adoption Placement Agreement Adoptions Recruitment & 1.44 PD Community Services Bureau AD 924 SP Independent Adoption Placement Agreement REQ MO MASTER ONLY Adoptions Recruitment & Community Services Bureau

REC= RECOMMENDED

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
AD 925	Independent Adoption Placement Agreement (Indian Child)	REQ	Adoptions Recruitment & Community Services Bureau	МО	MASTER ONLY
AD 926	Statement of Understanding Independent Adoption Program Parent Who Places The Child With The Adoptive Parents	REQ	Adoptions Recruitment & Community Services Bureau	SE	.20 SE
AD 926 SP	Statement of Understanding Independent Adoption Program Parent Who Places The Child With The Adoptive Parents	REQ	Adoptions Recruitment & Community Services Bureau	SE	.06 SE
AD 927	Statement of Understanding Independent Adoption Program	REQ	Adoptions Recruitment & Community Services Bureau	SE	.19 SE
AD 928	Consent Revocation - Independent Adoption Program	REQ	Adoptions Recruitment & Community Services Bureau	МО	MASTER ONLY
AD 929	Waiver Of Rights To Revoke Consent Independent Adoption Program	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 4.20 PD
AD 929 SP	Waiver Of Right To Revoke Consent Independent Adoption Program	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 3.14 PD
AD 930	Independent Adoption Placement Agreement Transmittal	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 3.15 PD
AD 4310 ENG/SP	Adoption Programs Notice Required By Information Practices Act	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH FREE
AD 4311	Information On American Indian Child (Adoption Program)	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 4.01 PD
AD 4312	7017(c) Court Report Guide	REC	Adoptions Recruitment & Community Services Bureau	MO	MASTER ONLY
AD 4313	Letter Requesting Parent To Be Interviewed	REC	Adoptions Recruitment & Community Services Bureau	EA	FREE
AD 4317	Revocation Of Relinquishment	REQ	Adoptions Recruitment & Community Services Bureau	MO	MASTER ONLY
AD 4320	Adoption Assistance Agreement	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 1.39 PD
AD 4320 SP	Adoption Assistance Agreement	REQ	Adoptions Recruitment & Community Services Bureau	PD	50 SH 1.50 PD

REC= RECOMMENDED

AMOUNT PER ORDER UNIT ORDER FORM TITLE **REQ PROGRAM** only 100/50 SH per PD or BD unless NUMBER **RSP** CONTACT UNIT **REC** otherwise specified AD 4324 Adoption Questionnaire I **REC** Adoptions SE .22 SE Recruitment & Community Services Buréau AD 4324 SP **REC** MO Adoption Questionnaire I Adoptions MASTER ONLY Recruitment & Community Services Bureau AD 4328 Authorization For Release Of Personal Items **RSP** PD 50 SH Adoptions Recruitment & 2.31 PD Community Services Buréau Sponsoring Agency Or Organization's Statement Of Facts Regarding Ability To Meet The Alien's Needs CA 24 **REQ** CalWORKs MO MASTER ONLY Eligibility Bureau Sponsoring Agency Or Organization's Statement Of Facts Regarding Ability To Meet The Alien's Needs **REQ** CalWORKs **CA 24 SP** MO MASTER ONLY Eligibility Bureau **CA 44** Summary Report Of Assistance Expenditures For The **RSP** Fiscal Policy MO MASTER ONLY Cash Assistance program For Immigrants (State Only) Bureau Invoice, State Issued Benefit Checks, Cash Assistance **RSP** Financial Serives CA 45 MO MASTER ONLY Program For Immigrants Bureau Fiscal Policy Attachment To Invoice Form CA 45, Cash Assistance **CA 46 RSP** MO MASTER ONLY Program For Immigrants Bureau CA 72 SAWS Sponsor's Monthly Income And Resources Report **REQ** CalWORKs MO MASTER ONLY Eligibility Bureau CA 72 SAWS SP MASTER ONLY Sponsor's Monthly Income And Resources Report REQ **CalWORKs** MO Eligibility Bureau CalWORKs CA 73 SAWS Supplemental Monthly Income Report **RSP** MO MASTER ONLY Eligibility Bureau **RSP** CalWORKs MO CA 73 SAWS SP Supplemental Monthly Income Report MASTER ONLY Eligibility Bureau CA 100 County SAWS-WDTIP Expenditure Claim REQ Fiscal Systems MO MASTER ONLY Buréau **CA 237FC** Aid To Families With Dependent Children - Foster Care (FC) **REQ** Data Systems and EΑ **FREE** Caseload Movement And Expenditures Report Survéy Design Bureau California Work Opportunity and Responsibility to Kids (CalWORKs) Cash Grant Caseload Movement Report Data Systems and **CA 237 CW REQ** MO MASTER ONLY Survey Design Bureau **CA 237HA** Aid To Families With Dependent Children-Homeless Assistance **REQ** Data Systems and MO MASTER ONLY Program Monthly Statistical Report Survey Design Búreau CA 237TCC Transitional Child Care (TCC) Monthly Caseload Report **REQ** Data Systems and MO MASTER ONLY Survéy Design Bureau California Work Opportunity and Responsibility to Kids (CalWORKs) Report on Reasons for Discontinuances of **REQ** Data Systems and **CA 253 CW** MO MASTER ONLY Survey Design Bureau Cash Grant **CA 255 CW** California Work Opportunity and Responsibility to Kids **REQ** Data Systems and MO MASTER ONLY (CalWORKs) Report on Reasons for Denials and Other Survey Design Non-Approvals of Applications for Cash Grant Bureau Fiscal Policy CA 800A FC Summary Report Of Assistance Expenditures - Non-Federal **REQ** MO MASTER ONLY Children in Foster Care Bureau

REC= RECOMMENDED

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
CA 800D FED	Summary Report Of Expenditures For California Work Opportunity And Responsibility To Kids (CalWORKs) Diversion-Federal	RSP	Fiscal Policy Bureau	МО	MASTER ONLY
CA 800D STATE	Summary Report Of Expenditures For California Work Opportunity And Responsibility to Kids (CalWORKs) Diversion-State Only	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
CA 800EA STATE	Summary Report Of Assistance Expenditures For Emergency Assistance (EA) Foster Care-State Only	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
CA 800 FED- VOLUNTARY FC	Summary Report Of Assistance Expenditures Federal Children In Voluntary Foster Care	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
CA 800 FED	Summary Report Of Assistance Expenditures For California Work Opportunity And Responsibility To Kids (CalWORKs) Federal	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
CA 800 STATE	Summary Report Of Assistance Expenditures For CalWORKs - State Only All Families	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
CA 800 AFC NONFED	Summary Report of Assistance Expenditures-Nonfederal Children In Foster Care	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
CA 800FC FED	Summary Report Of Assistance Expenditures Federal Children In Foster Care	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
CA 800FC1 FED	Foster Care Facility Expenditure Statement Amounts Not Reimbursable From Federal Funds	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
CA 800FC2 FED	Foster Care Facility Expenditure Statement Amounts Not Reimbursable From State Funds	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
CA 800GD	Grant Diversion Summary Report Of Employer Payments	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
CA 800L STATE	Summary Report Of Assistance Expenditures for California Work Opportunity And Responsibility To Kids (CalWORKs) Legal Immigrants-State Only	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
CA 800M	Summary Report Of Assistance Expenditures For California Work Opportunity And Responsibilities To Kids (CalWORKs) Legal Immigrants (Mixed Cases)	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
CA 800RDP	Summary Report Of Assistance Expenditures Refugee Demonstration Project (RDP)	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
CA 800S STATE	Summary Report Of Assistance Expenditures For California Work Opportunity & Responsibility To Kids (CalWORKs) - State Only Two Parent Families	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
CA 801GD	Grant Diversion Wage Pool Financial Report	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
CA 802	Statistical Report On AFDC FG/U Recipients Aged 5-7 Needed To Implement The Education Consolidation and Improvement Act Of 1981	REQ	Data Analysis And Publications Branch	МО	MASTER ONLY
CA 803	Statistics On Children In Foster Family Homes Needed To Implement the Education Consolidation an Improvement Act of AFDC	REQ	Data Analysis And Publications Branch	МО	MASTER ONLY
CA 806	Grant Based On-The-Job Training Summary Report Of Assistance Expenditures For CalWORKs Bureau	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
CA 807	Grant Based On-The-Job Training Summary Report Of Assistance Expendtirues For-CalWORKs Legal Immigrants (Mixed Cases)	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
CA 808	Grant Based On-The-Job Training Summary Report Of Assistance Expenditures For CalWORKs-State Only Two Parent Families	REQ	Fiscal Policy Bureau	МО	MASTER ONLY

REQ= REQUIRED FORM NO RSP= REQUIRED FORM SUBSTITUTE CHANGE PERMITTED WITH PRIOR DSS APPROVAL			REC= RECOMMENDED FORM			
FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified	
CA 809	Grant Based On-The-Job Training Summary Report Of Of Assistance Expenditures For CalWORKs-Federal All Families	REQ	Fiscal Policy Bureau	МО	MASTER ONLY	
CA 812	Quarterly Report Of Overpayments And Collections	REQ	Data Analysis And Publications Branch	МО	MASTER ONLY	
CA 1015	Education Consolidation And Improvement Act Of 1981	REQ	Data Analysis And Publications Branch	МО	MASTER ONLY	
CA 1019	Summary Report Of Expenditures For - Seriously Emotionally Disturbed Children	REQ	Data Analysis And Publications Branch	МО	MASTER ONLY	
CA 1019EA SED	Summary Report Of Emergency Assistance Expenditures For Seriously Emotionally Disturbed Children (SED)	REC	Data Analysis And Publications Branch	МО	MASTER ONLY	
CA 1031 ENG/SP	Work Pays! Get Cash Back From The IRS (Earned Income Credit Informational Stuffer)	REC	CalWORKs Eligibility Bureau	МО	MASTER ONLY	
CCP 1 ENG/SP	Declaration Of Exemption For Trustline Registration	REQ	Child Care Program Bureau	МО	MASTER ONLY	
CCP 4 ENG/SP	Health and Safety Self Certification (For License-Exempt Providers)	RSP	Child Care Program Bureau	МО	MASTER ONLY	
CCP 6	Health & Safety Facility checklist	REC	Child Care Program Bureau	МО	MASTER ONLY	
CCP 6 SP	Health & Safety Facility checklist	REC	Child Care Program Bureau	МО	MASTER ONLY	
CL 1 ENG/SP	Cal-Learn Registration Program Information Orientation Appointment	RSP	Work Support Services & Teen Programs Bureau	МО	MASTER ONLY	
CL 2 ENG/SP	Cal-Learn Program Requirements	RSP	Work Support Services & Teen Programs Bureau	МО	MASTER ONLY	
CL 3 ENG/SP	Cal-Learn Notice Of A Participation Problem	RSP	Work Support Services & Teen Programs Bureau	МО	MASTER ONLY	
CL 4 ENG/SP	Cal-Learn Informing Notice To Parent/Legal Guardian Of Cal-Learn Participant	RSP	Work Support Services & Teen Programs Bureau	МО	MASTER ONLY	
CL 8 ENG/SP	Cal-Learn Notice Of Report Card Submittal Schedule	RSP	Work Support Services & Teen Programs Bureau	МО	MASTER ONLY	
CL 9 ENG/SP	Cal-Learn Notice Of No Good Cause Determination	RSP	Work Support Services & Teen Programs Bureau	МО	MASTER ONLY	
CL 10 ENG/SP	Cal-Learn Notice Of Exemption/Deferral	RSP	Work Support Services & Teen Programs Bureau	МО	MASTER ONLY	
CL 11 ENG/SP	Cal-Learn Notice of Incomplete Grades	RSP	Work Support Services & Teen Programs Bureau	МО	MASTER ONLY	
CL 15	Cal-Learn Case Management Information Intercounty Transfer Form	RSP	Work Support Services & Teen Programs Bureau	МО	MASTER ONLY	

AMOUNT PER ORDER UNIT ORDER FORM TITLE **REQ PROGRAM** only 100/50 SH per PD or BD unless otherwise specified NUMBER **RSP** CONTACT UNIT **REC CL 16** MASTER ONLY Cal-Learn Case Management Inter-County Transfer Summary **RSP** Work Support MO Services & Teen Programs Bureau CW 2.1NA **RSP** PD Notice And Agreement For Child, Spousal And Medical Support CalWORKs 2.14 PD Eligibility Bureau CalWORKs CW 2.1NA SP Notice And Agreement For Child, Spousal And Medical Support **RSP** PD 2.13 PD Eligibility Bureau CalWORKs **RSP** SE CW 2.1Q Support Questionnaire .07 SE Eligibility Bureau CW 2.1Q SP Support Questionnaire RSP CalWORKs SE .07 SE Eligibility Bureau CW 4 Immediate Need Payment Request **RSP** CalWORKs SE .18 SE Eligibility Bureau RSP CalWORKs SE .61 SE CW 4 SP Immediate Need Payment Request Eligibility Bureau Veteran's Benefits Verification and Referral **RSP** CalWORKs CW 5 SE .15 SE Eligibility Bureau CalWORKs CW 5 SP Veteran's Benefits Verification and Referral **RSP** SE .20 SE Eligibility Bureau CW 7 **RSP** CalWORKs PD 100 SH Monthly Eligibility Report Eligibility Bureau 2.10 PD CW 7 SP Monthly Eligibility Report **RSP** CalWORKs PD 100 SH Eligibility Bureau 3.30 PD CW 7A How To Fill Out Your CW 7 or SAWS 7 CalWORKs PD **RSP** FREE Eligibility Bureau CW 7A SP Hot To Fill Out Your CW 7 or SAWS 7 **RSP** CalWORKs PD FREE Eligibility Bureau CW₈ Statement Of Facts To Add A Child Under Age 16 **REC** CalWORKs SE .16 SE Eligibility Bureau REC CalWORKs CW 8 SP SE .25 SE Statement Of Facts To Add A Child Under Age 16 Eligibility Bureau CW 8A Statement Of Facts To Add A Child(ren) Under Age 16 **REC** CalWORKs MO MASTER ONLY Eligibility Bureau REC CalWORKs CW 8A SP Statement Of Facts To Add A Child(ren) Under Age 16 MO MASTER ONLY Eligibility Bureau CalWORKs CW 10 Notice Of Withdrawn Application **RSP** MO MASTER ONLY Eligibility Bureau CalWORKs **CW 10 SP** Notice Of Withdrawn Application **RSP** MO MASTER ONLY Eligibillity Bureau Senior Parent Statement Of Facts **RSP** CalWORKs MO CW 23 MASTER ONLY Eligibility Bureau CW 23 SP Senior Parent Statement Of Facts **RSP** CalWORKs MO MASTER ONLY Eligibility Bureau **RSP** CalWORKs CW 25 Supplemental Statement Of Facts - Minor Parent SE .22 SE Eligibility Bureau CalWORKs **CW 25 SP** Supplemental Statement Of Facts - Minor Parent **RSP** MO MASTER ONLY Eligibility Bureau

REC= RECOMMENDED

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
CW 25A	Payee Agreement For Minor Parent	RSP	CalWORKs Eligibility Bureau	SE	.25 SE
CW 25A SP	Payee Agreement For Minor Parent	RSP	CalWORKs Eligibility Bureau	SE	.32 SE
CW 30	CalWORKs Budget Worksheet	REC	CalWORKs Eligibility Bureau	PD	100 SH 5.04 PD
CW 31	Receipt For Documents	REC	CalWORKs Eligibility Bureau	PD	FREE
CW 40 ENG/SP	AFDC-Reduced Income Supplemental Payment Request	REQ	CalWORKs Eligibility Bureau	PD	100 SH 2.00 PD
CW 42	Statement Of Facts - Homeless Assistance	RSP	CalWORKs Eligibility Bureau	SE	.04 SE
CW 42 SP	Statement Of Facts - Homeless Assistance	RSP	CalWORKs Eligibility Bureau	SE	.12 SE
CW 43	CALWORKs Applicant Choice Form Immediate Need Payment/Expedited Grant	RSP	CalWORKs Eligibility Bureau	SE	.20 SE
CW 43 SP	CALWORKs Applicant Choice Form Immediate Need Payment/Expedited Grant	RSP	CalWORKs Eligibility Bureau	SE	.56 SE
CW 51	Child Support - Good Cause Claim For Noncooperation	RSP	CalWORKs Eligibility Bureau	SE	.12 SE
CW 51 SP	Child Support - Good Cause Claim For Noncooperation	RSP	CalWORKs Eligibility Bureau	SE	.26 SE
CW 60	Release Of Information - Financial Institution	RSP	CalWORKs Eligibility Bureau	MO	MASTER ONLY
CW 60 SP	Release Of Information - Financial Institution	RSP	CalWORKs Eligibility Bureau	MO	MASTER ONLY
CW 61	Authorization To Release Medical Information	RSP	CalWORKs Eligibility Bureau	PD	100 SH 1.25 PD
CW 61 SP	Authorization To Release Medical Information	RSP	CalWORKs Eligibility Bureau	PD	100 SH .60 PD
CW 61 COVERSHEET	Dear Health Care Provider	RSP	CalWORKs Eligibility Bureau	PD	100 SH 2.52 PD
CW 61 COVERSHEET SP	Dear Health Care Provider	RSP	CalWORKs Eligibility Bureau	PD	100 SH 1.43 PD
CW 61A	Physical Capacities	RSP	CalWORKs Eligibility Bureau	PD	100 SH 2.48 PD
CW 61A SP	Physical Capacities	RSP	CalWORKs Eligibility Bureau	PD	100 SH 1.20 PD
CW 61B	Mental Capacities	RSP	CalWORKs Eligibility Bureau	PD	100 SH 2.60 PD
CW 61B SP	Mental Capacities	RSP	CalWORKs Eligibility Bureau	PD	100 SH 1.12 PD
CW 71	Statement Of Cash Aid Mother And Unrelated Adult Male (UAM)	RSP	CalWORKs Eligibility Bureau	PD	100 SH 6.54 PD
CW 71 SP	Statement Of Cash Aid Mother And Unrelated Adult Male (UAM)	RSP	CalWORKs Eligibility Bureau	PD	100 SH 1.20 PD

AMOUNT PER ORDER UNIT ORDER FORM TITLE **REQ PROGRAM** only 100/50 SH per PD or BD unless NUMBER **RSP** CONTACT UNIT **REC** otherwise specified CW 73 Senior Parent Monthly Income Report **RSP** CalWORKs MO MASTER ONLY Eligibility Bureau CalWORKs Eligibility Bureau MASTER ONLY **RSP** CW 73 SP Senior Parent Monthly Income Report MO CW 81 **RSP** CalWORKs MASTER ONLY Lien Agreement MO Eligibility Bureau CalWORKs **RSP** MO MASTER ONY **CW 81 SP** Lien Agreement Eligibility Bureau CW 82 **RSP** CalWORKs MO MASTER ONLY Important Information About This Agreement Eligibility Bureau **CW 82 SP** Important Information About This Agreement **RSP** CalWORKs MO MASTER ONLY Eligibility Bureau CalWORKs CW 86 Agreement-Restricted Account CalWORKs Program **RSP** MO MASTER ONLY Eligibility Bureau **CW 86 SP** Agreement-Restricted Accounty CalWORKs Program **RSP** CalWORKs MO MASTER ONLY Eligibility Bureau **RSP** CalWORKs CW 88 You May Be Eligible For Diversion Services MO MASTER ONLY Eligibility Bureau **CW 88 SP** You May Be Eligible For Diversion Services RSP CalWORKs MO MASTER ONLY Eligibility Bureau Transitional Medi-Cal **REQ** CalWORKs MASTER ONLY CW 103 MO MULTILINGUAL Eligibility Bureau CW 103 SP Transitional Medi-Cal **REQ** CalWORKs MO MASTER ONLY Eligibility Bureau CalWORKs MASTER ONLY CW 215 Notification Of Intercounty Transfer **REQ** MO Eligibility Bureau CW 371 Referral To Local Child Support Services Agency (LCSSA) **RSP** CalWORKs SE .08 SE Eligibility Bureau CW 801 Summary Report of Performance Incentives For Diversion And **REQ** Fiscal Policy MO MASTER ONLY Grant Reductions due to Increased Earnings For the California Work Opportunity And Responsibilities to Kids (CalWORKs) Bureau CW 801.1 California Work Opportunity and Reponsibility to Kids **REQ** Fiscal Policy MO MASTER ONLY (CalWORKs) Earned Employment Income Incentive Summary Bureau REQ Fiscal Policy CW 801.2 California Work Opportunity and Responsibility to Kids MO MASTER ONLY (CalWORKs) Diversion Grant Savings Summary Bureau CalWORKs CW 2102 The MAP Rule For Recipients Of Cash Aid **RSP** SE .05 SE Eligibility Bureau CalWORKs CW 2102 SP The MAP Rule For Recipients Of Cash Aid **RSP** SE .10 SE Eligibility Bureau **RSP** CalWORKs CW 2102A Your Family's Cash Aid MO MASTER ONLY MULTILINGUAL Eligibility Bureau CalWORKs MASTER ONLY CW 2184 CalWORKs 60-Month Time Limt **REQ** MO MULTILINGUAL Eligibility Bureau Fraud Prevention DE 8720 Request For Wage Claim And Address Information (EDD form) **REQ** EΑ **FREE** Bureau **DE 8720A** Request For Wage Information (EDD form) **REQ** Fraud Prevention EΑ **FREE** Bureau

REC= RECOMMENDED

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
DFA 1	Special Time Reporting - Eligibility Nonservice	REQ	Data Analysis And Publications Branch	МО	MASTER ONLY
DFA 7	Support Staff Time Report	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
	* See Reproduction and Distribution of Administrative Expense Claim Forms on Index Page V				
* DFA 7A	Support Staff Summary	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
* DFA 7B	Support Staff Salary Distribution To Program	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
DFA 10	Generic Time Study Caseworker/EDP/Staff Development	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
* DFA 47	Social Services Time Study Summary	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
* DFA 53	Employment Services Time Study Summary	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
DFA 256	Participation And Coupon Issuance Report - Food Stamp Program	REQ	Data Analysis And Publicatioons Branch	МО	MASTER ONLY
DFA 280	Homeless Meal Providers Certification	REC	Food Stamp Bureau	МО	MASTER ONLY
DFA 285.1	Income From Farm Operations And Other Self-Employment Sheet	REQ	Food Stamp Bureau	МО	MASTER ONLY
DFA 285.1 SP	Income From Farm Operations And Other Self-Employment Sheet	REQ	Food Stamp Bureau	МО	MASTER ONLY
DFA 285-A1	Application For Food Stamps-Part 1	REQ	Food Stamp Bureau	PD	100 SH 3.32 PD
DFA 285-A1 SP	Application For Food Stamps - Part 1	REQ	Food Stamp Bureau	PD	50 SH 2.26 PD
DFA 285-A2	Application For Food Stamps-Part 2	REQ	Food Stamp Bureau	SE	.07 SE
DFA 285-A2 SP	Application For Food Stamps - Part 2	REQ	Food Stamp Bureau	SE	.13 SE
DFA 285-A3	Important Facts for Food Stamp Applicants	REQ	Food Stamp Bureau	SE	.08 SE
DFA 285-A3 SP	Important Facts For Food Stamp Applicants	REQ	Food Stamp Bureau	SE	.09 SE
DFA 285B	Food Stamp Budget Worksheet	RSP	Food Stamp Bureau	PD	100 SH 2.23 PD
DFA 285C	Food Stamp Supplemental Application For Special Medical Deductions	REQ	Food Stamp Bureau	PD	100 SH 3.41 PD
DFA 285C SP	Supplemental Application For Special Medical Deductions	REQ	Food Stamp Bureau	PD	50 SH 6.53 PD
DFA 285D	Food Stamp Budget Worksheet	RSP	Food Stamp Bureau	PD	100 SH 5.86 PD

RSP= REQUIRED FORM SUBSTITUTE WITH PRIOR DSS APPROVAL

REC= RECOMMENDED FORM

REQ= REQUIRED FORM NO CHANGE PERMITTED

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
DFA 286	Household Issuance Record (HIR Card)	RSP	Food Stamp Bureau	EA	.05 EA
DFA 287	Food Stamp Program Identification Card	RSP	Food Stamp Bureau	EA	.04 EA
DFA 288	Notice Of Change To Authorization To Participate Master File Or Household Issuance Record	RSP	Food Stamp Bureau	PD	100 SH 2.84 PD
DFA 289	Food Stamp Program Receptionist's Daily Tally Sheet	RSP	Food Stamp Bureau	МО	MASTER ONLY
DFA 290	Food Coupon Book Issuance Register	RSP	Food Stamp Bureau	PD	100 SH 3.39 PD
DFA 293	Cashier's Daily Report	RSP	Food Stamp Bureau	PD	100 SH 4.36 PD
DFA 296	Food Stamp Program Monthly Caseload Movement Statistical Report	REQ	Data Analysis And Publications Branch	МО	MASTER ONLY
DFA 296X	Food Stamp Program Expedited Service Quarterly Statistical Report	REQ	Data Analysis And Publications Branch	МО	MASTER ONLY
DFA 299	Authorization To Participate Card	REQ	Food Stamp Bureau	МО	MASTER ONLY
DFA 300	Food Stamps Mail Issuance Log	RSP	Food Stamp Bureau	МО	MASTER ONLY
DFA 301	Mail Issuance Request	RSP	Food Stamp Bureau	PD	50 SH 3.95 PD
DFA 301 SP	Mail Issuance Request	RSP	Food Stamp Bureau	PD	50 SH .95 PD
DFA 303	Replacement Affidavit/Authorization	RSP	Food Stamp Bureau	PD	100 SH 7.87 PD
DFA 303 SP	Replacement Affidavit/Authorization	RSP	Food Stamp Bureau	МО	MASTER ONLY
DFA 335	Temporary Assistance For Needy Families (TANF)	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
*DFA 323	Eligibility Time Study Summary	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
* DFA 325.1	County Administrative Expense Claim-Expenditure Schedule	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
* DFA 325.1A	County Administrative Expense Claim - EDP Cost Detail Schedule	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
*DFA 325.1AA	County Administrative Expense Claim EDP Program Input Schedule	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
*DFA 325.1B	County Administrative Expense Claim - Direct Cost Input Schedule	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
*DFA 325.1C	County Administrative Expense Claim - Staff Development	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
*DFA 325.1E	Direct-To-Program Support Staff Salary Input	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
* DFA 325.5	Expenditure Certification For Welfare Administrative Expense Claims	REQ	Fiscal Policy Bureau	МО	MASTER ONLY

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
*DFA 327.1A	County Administrative Expense Claim Allocation Of Casework Salary Costs And Allocable Support Staff And Operating Costs	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
*DFA 327.1B	County Administrative Expense Claim Allocation Of Casework Salary Costs And Allocable Support Staff And Operating Costs	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
*DFA 327.1C	County Administrative Expense Claim Allocation Of Casework Salary Costs And Allocable Support Staff And Operating Costs	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
*DFA 327.1D	County Administrative Expense Claim Allocations Of Casework Salary Costs And Allocable Support Staff And Operating Costs	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
*DFA 327.2A	County Administrative Expense Claim Allocation Of EDP Costs	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
*DFA 327.2B	County Administrative Expense Claim Allocation Of EDP Costs (Non-SAWS)	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
*DFA 327.2D	County Administrative Expense Claim Allocation Of EDP Costs (SAWS) Cost Distribution	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
*DFA 327.3A	County Administrative Expense Claim-Social Services Cost Summary	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
*DFA 327.3B	County Administrative Expense Claim Eligibility Cost Summary And Non-Fed Modification	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
*DFA 327.3C	County Administrative Expense Claim Welfare Fraud Cost Summary And AFDC/FS Modification	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
* DFA 327.3D	County Administrative Expense Claim Employment Services Cost Summary And Non-Fed Modification	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
*DFA 327.4A	County Administrative Expense Claim Staff Development Cost Summary And Funding-Social Services	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
* DFA 327.4B	County Administrative Expense Claim Staff Development Cost Summary And Funding-Eligibility And Welfare Fraud	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
*DFA 327.4D	County Administrative Expense Claim Staff Development Cost Summary And Funding-Employment Services	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
*DFA 327.5A	County Administrative Expense Claim Funding-Social Services	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
*DFA 327.5B	County Administrative Expense Claim Funding-Eligibility And Welfare Fraud	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
*DFA 327.5D	County Administrative Expense Claim Funding - Employment	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
DFA 332.1	Verification Of Food Stamp ATP Usage	REC	Food Stamp Bureau	PD	100 SH 2.72 PD
DFA 335	Tempoary Assistance For Needy Families (TANF) Incentive Funds Expenditure	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
DFA 358	Food Stamp Program Participants By Ethnic Group Participation	REQ	Data Analysis And Publications Branch	МО	MASTER ONLY
DFA 377.1	Notice Of Approval	REQ	Food Stamp Bureau	SE	.08 SE
DFA 377.1 SP	Notice Of Approval	RSP	Food Stamp Bureau	SE	.11 SE
DFA 377.1A	Notice Of Denial Or Pending Status	REQ	Food Stamp Bureau	SE	.14 SE

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
DFA 377.1A SP	Notice Of Denial Or Pending Status	REQ	Food Stamp Bureau	SE	.30 SE
DFA 377.2	Food Stamp Notice Of Expiration Of Certification	REQ	Food Stamp Bureau	МО	MASTER ONLY
DFA 377.2 SP	Food Stamp Notice Of Expiration Of Certification	REQ	Food Stamp Bureau	МО	MASTER ONLY
DFA 377.4	Food Stamp Notice Of Change	REQ	Food Stamp Bureau	SE	.05 SE
DFA 377.4 SP	Food Stamp Notice Of Change	REQ	Food Stamp Bureau	SE	.08 SE
DFA 377.4A	Food Stamp Notice Of Change	REQ	Food Stamp Bureau	SE	.11 SE
DFA 377.4A SP	Food Stamp Notice Of Change	REQ	Food Stamp Bureau	SE	.15 SE
DFA 377.5	Food Stamp Household Change Report	REQ	Food Stamp Bureau	PD	50 SH 2.76 PD
DFA 377.5 SP	Food Stamp Household Change Report	REQ	Food Stamp Bureau	PD	50 SH 4.00 PD
DFA 377.7A	Notice Of Administrative Disqualification	REQ	Food Stamp Bureau	SE	.10 SE
DFA 377.7A SP	Notice Of Administrative Disqualification	REQ	Food Stamp Bureau	МО	MASTER ONLY
DFA 377.7B	Food Stamp Repayment Notice For Inadvertent Household Errors Only	REQ	Food Stamp Bureau	SE	.22 SE
DFA 377.7B SP	Food Stamp Repayment Notice For Inadvertent Household Errors Only	REQ	Food Stamp Bureau	МО	MASTER ONLY
DFA 377.7B1	Food Stamp Repayment Notice For Inadvertent Household Errors Only Final Notice	REQ	Food Stamp Bureau	SE	.15 SE
DFA 377.7B1 SP	Food Stamp Repayment Notice For Inadvertent Household Errors Only Final Notice	REQ	Food Stamp Bureau	МО	MASTER ONLY
DFA 377.7C	Food Stamp Repayment Agreement For Inadvertent Household Errors Only	REQ	Food Stamp Bureau	SE	.27 SE
DFA 377.7C SP	Food Stamp Repayment Agreement For Inadvertant Household Errors Only	REQ	Food Stamp Bureau	МО	MASTER ONLY
DFA 377.7D	Food Stamp Repayment Notice For Administrative Errors Only	REQ	Food Stamp Bureau	МО	MASTER ONLY
DFA 377.7D SP	Food Stamp Repayment Notice For Administrative Errors Only	REQ	Food Stamp Bureau	МО	MASTER ONLY
DFA 377.7D1	Food Stamp Repayment Notice For Administrative Errors Only	RSP	Food Stamp Bureau	SE	.23 SE
DFA 377.7D1 SP	Food Stamp Repayment Notice For Administrative Errors Only	RSP	Food Stamp Bureau	SE	.30 SE
DFA 377.7D2	Food Stamp Repayment Notice For Administrative Errors Only Final Notice	REC	Food Stamp Bureau	SE	.15 SE
DFA 377.7D2 SP	Food Stamp Repayment Notice For Administrative Errors Only Final Notice	REC	Food Stamp Bureau	МО	MASTER ONLY

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
DFA 377.7D3	Food Stamp Repayment Notice For Administrative Errors Only	REQ	Food Stamp Bureau	SE	.24 SE
DFA 377.7D3 SP	Food Stamp Repayment Notice For Administrative Errors Only	REQ	Food Stamp Bureau	SE	.36 SE
DFA 377.7E	Food Stamp Repayment Agreement For Administrative Errors Only	REQ	Food Stamp Bureau	SE	.16 SE
DFA 377.7E SP	Food Stamp Repayment Agreement For Administrative Errors Only	REQ	Food Stamp Bureau	SE	.25 SE
DFA 377.7E1	Food Stamp Repayment Agreement For Administrative Errors Only	REC	Food Stamp Bureau	SE	.14 SE
DFA 377.7E1 SP	Food Stamp Repayment Agreement For Administrative Errors Only	REC	Food Stamp Bureau	SE	.14 SE
DFA 377.7F	Food Stamp Repayment Notice For An Intentional Program Violation (IPV)	REQ	Food Stamp Bureau	SE	.19 SE
DFA 377.7F SP	Food Stamp Repayment Notice For An Intentional Program Violation (IPV)	REQ	Food Stamp Bureau	МО	MASTER ONLY
DFA 377.7F1	Food Stamp Repayment Notice For An Intentional Program Violation (IPV) Only - Final Notice	REQ	Food Stamp Bureau	SE	.15 SE
DFA 377.7F1 SP	Food Stamp Repayment Notice For An Intentional Program Violation (IPV) Only - Final Notice	REQ	Food Stamp Bureau	МО	MASTER ONLY
DFA 377.7G	Food Stamp Repayment Agreement For An Intentional Program Violation (IPV) Only	REQ	Food Stamp Bureau	SE	.27 SE
DFA 377.7G SP	Food Stamp Repayment Agreement For An Intentional Program Violation (IPV) Only	REQ	Food Stamp Bureau	МО	MASTER ONLY
DFA 377.9	Notice Of Back Food Stamp Benefits	RSP	Food Stamp Bureau	МО	MASTER ONLY
DFA 377.9 SP	Notice Of Back Food Stamp Benefits	RSP	Food Stamp Bureau	МО	MASTER ONLY
DFA 377.10	Food Stamp Notice Of Disqualification	REQ	Food Stamp Bureau	МО	MASTER ONLY
DFA 377.10 SP	Food Stamp Notice Of Disqualification	REQ	Food Stamp Bureau	МО	MASTER ONLY
DFA 377.11A	Food Stamp Notice Of Discontinuance	REC	Employment Programs	МО	MASTER ONLY
DFA 377.11A SP	Food Stamp Notice Of Discontinuance	REC	Employment Programs	МО	MASTER ONLY
DFA 377.11B	Food Stamp Notice Of Discontinuance	REC	Employment Programs	МО	MASTER ONLY
DFA 377.11B SP	Food Stamp Notice Of Discontinuance	REC	Employment Programs	МО	MASTER ONLY
DFA 385	Application For Emergency Food Stamp Assistance	REQ	Food Stamp Bureau	МО	MASTER ONLY
DFA 385 SP	Application For Emergency Food Stamp Assistance	REQ	Food Stamp Bureau	МО	MASTER ONLY
DFA 385A	Notice Of Action Emergency Food Stamp Assistance	REC	Food Stamp Bureau	МО	MASTER ONLY

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
DFA 385A SP	Notice Of Action Emergency Food Stamp Assistance	REC	Food Stamp Bureau	МО	MASTER ONLY
DFA 403	Reconciliation Of Time Studies To Allocable Salary Pools	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
DFA 419	Claim Summary Sheet	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
DFA 478	Disqualification Consent Agreement Food Stamp Program	REC	Fraud Prevention Bureau	МО	MASTER ONLY
DFA 478 SP	Disqualification Consent Agreement Food Stamp Program	REC	Fraud Prevention Bureau	МО	MASTER ONLY
DPA 482	Income and Eligibility Verification System (IEVS) Report	REQ	Data Analysis And Publications Branch	МО	MASTER ONLY
DFA 837	Summary Report Of Assistance Expenditures Old Age Security, Aid To The Blind, And Aid To The Disabled	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
DFA 842	Claim Determination Worksheet	RSP	Food Stamp Bureau	МО	MASTER ONLY
DFA 844	ORR Funds For AFDC Time Eligible Refugees/Entrants	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
DFA 844RDP	ORR Funds For Refugee Demonstration Project Recipients (RDP)	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
DFA 846	Summary Report Of Assistance Expenditures For The Refugee Cash Assistance Program (RCA) (Includes Entrants)	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
DFA 847	Additional Federal Funds Claimable Based On The Nonfederal Share of Expenditures For Refugee Resettlement, Cuban Program Phasedown and C/H Entrant Recipients Fed AFDC/FC	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
DFA 863	Additional Federal Funds claimable Based On The Nonfederal Share For Refugee Resettlement And Cuban/Haitian Dentran Recipients In Receipt Of EA-UP	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
DFA 874	Statewide Intercounty Lost Warrant Replacement Affidavit	REC	Fiscal Policy Bureau	МО	MASTER ONLY
DFA 876	State Legalization Impact Assistance Grant (SLIAG) Funds Claimable Based On Expenditures For Eligible Legalized Aliens (ELA) General Assistance	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
DFA 877	State Legalization Impact Assistance Grant (SLIAG) Funds For Eligible Legalized Aliens (ELA) AFDC-Foster Care	REQ	Fiscal Policy Bureau	MO	MASTER ONLY
DFA 878	State Legalization Impact Assistance Grant (SLIAG) Funds For Eligible Legalized Aliens (ELA) State-Only AFDC/FG-U	REQ	Fiscal Policy Bureau	MO	MASTER ONLY
DFA 879	Fraud Investigators Time Study Summary	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
DFA 880	Time Study Methodologly Certification	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
DFA 881	Summary Report Of Assistance Expenditures For Emergency Assistance (EA)/General Assistance (GA) - Child Welfare Services (CWS) - Federal	REQ	Fiscal Policy Bureau	МО	MASTER ONLY
DFA 882	Process Checklist	REQ	Fiscal Policy Bureau	МО	MASTER ONLY

REC= RECOMMENDED

011/11/02	WITH RICK BOOTH I ROW	_			<u> </u>
FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
DPA 13	Request For State Hearing Before The State Department Of Social Services	REQ	Administration Adjudication Operations Support Bureau	EA	.03 EA
DPA 13 SP	Request For State Hearing Before The State Department Of Social Services	REQ	Administration Adjudication Operations Support Bureau	EA	.01 EA
DPA 19	Authorized Representative	REQ	Administration Adjudication Operations Support Bureau	EA	.01 EA
DPA 19 SP	Authorized Representative	REQ	Administration Adjudication Operations Support Bureau	EA	.03 EA
DPA 266	Fraud Investigation Activity Report	REQ	Data Analysis And Publications Branch	МО	MASTER ONLY
DPA 302	Interpreter/Translator Billing	REQ	Management Services Branch	SE	FREE
DPA 315 ENG/SP	Withdrawal/Conditional Withdrawals Of Request For Hearing	REQ	Administrative Adjudication Operations Support Bureau	PD	50 SH 1.10 PD
DPA 316	Subpena/Subpena Duces Tecum	REQ	Administrative Adjudication Operations Support Bureau	PD	50 SH FREE
DPA 353	Notice Of Aid To Families With Dependent Children (AFDC) And/Or Food Stamps Administrative Disqualification Hearing	REC	Administrative Adjudication Operation Support Bureau	МО	MASTER ONLY
DPA 353 SP	Notice Of Aid To Families With Dependent Children (AFDC) And/Or Food Stamps Administrative Disqualification Hearing	REC	Administrative Adjudication Operation Support Bureau	МО	MASTER ONLY
DPA 353A	Administrative Disqualification Hearing Information	REQ	Administrative Adjudication Operations Support Bureau	МО	MASTER ONLY
DPA 353A SP	Administrative Disqualification Hearing Information	REQ	Administrative Adjudication Operations Support Bureau	МО	MASTER ONLY
DPA 354	Request For Administrative Disqualification Hearing(Food Stamps)	REQ	Administrative Adjudication Operations Support Bureau	МО	MASTER ONLY
DPA 401	Appeals Transmittal List	REQ	Administrative Adjudication Operations Support Bureau	PD	50 SH FREE
DPA 421 SP	Notification Of Open Record And Waiver Of Time	REQ	Administrative Adjudication Operations Support Bureau	МО	MASTER ONLY
DPA 433	Penalty Case Analysis Report	REQ	Administrative	МО	MASTER ONLY

AMOUNT PER ORDER UNIT ORDER TITLE REQ PROGRAM FORM only 100/50 SH per PD or BD unless NUMBER **RSP** CONTACT UNIT **REC** otherwise specified Adjudication Operations Support Bureau Administrative Disqualification Hearing Waiver - Aid To Families With Dependent Children (AFDC)/Food Stamps Administrative **REC DPA 479** MO MASTER ONLY Adjudication Operations Support Bureau **DPA 479 SP** Administrative Disqualification Hearing Waiver - Aid To Families REC Administrative MO MASTER ONLY With Dependent Children (AFDC)/Food Stamps Adjudication Operations Support Bureau **DPA 485** How To Request A Translation **REC** Staff Development EΑ **FREE** MULTILINGUAL Training Bureau Fraud Prevention **DPS 248A** Child Support Consumer Credit Report Notification (County Used) **REQ** SE/BX **FREE** Bureau **DPS 249** AFDC/FS Intercept County Transaction Document REQ Fraud Prevention MO MASTER ONLY Bureau **RSP** Fraud Prevention **DPS 526** IEVS/Payment Verification System County Response Document SE **FREE** Bureau **DPS 528** Department of Social Services IEVS/Deceased Persons Match **RSP** Fraud Prevention MO MASTER ONLY Bureau Fraud Prevention **DWCWCAB 6** Notice And Request For Allowance of Lien **REQ** PD 50 SH Bureau **FREE** EA 1 CWS **REQ** Fiscal Policy **Emergency Assistance Application Child Welfare Services** MO MASTER ONLY Bureau EC 200A Request For Verification - Financial RSP MO MASTER ONLY Review And Evaluation Bureau **RSP** Review And EC 202A MO MASTER ONLY Request For Verification - General **Evaluation Bureau** EC 233 **RSP** Review And MO MASTER ONLY AFDC Computation Form Evaluation Bureau EL 800 Summary Report Of Uncollected Loans REQ Fiscal Policy MO MASTER ONLY Bureau EP 4 Summary Of FS/Employment & Training Program REQ Employmernt MO MASTER ONLY Bureau EP 5 Your Employment Program Hearing Rights/ **REQ Employmernt** MO MASTER ONLY Hearing Request Bureau Your Employment Program Hearing Rights/ EP 5 SP **REQ** Employmernt MO MASTER ONLY Hearing Request Bureau FC 2 Statement Of Facts Supporting Eligibility For AFDC-Foster REQ Foster Care SE .05 SE Policy Bureau Care (FC) FC 2 SP Statement Of Facts Supporting Eligibility For AFDC-Foster **REQ** Foster Care SE .04 SE Care (FC) Policy Bureau RSP Foster Care FC 3 PD 50 SH Determination Of Federal AFDC-FC Eligibility 2.52 PD Policy Bureau **RSP** Foster Care PD 50 SH FC 3A AFDC-FG/U Linkage Worksheet Policy Bureau 1.58 PD Foster Care **RSP** FC 4 AFDC Program Choice Indicator PD 50 SH Policy Bureau .74 PD

REC= RECOMMENDED

AMOUNT PER ORDER UNIT ORDER FORM TITLE **REQ PROGRAM** only 100/50 SH per PD or BD unless RSP CONTACT **NUMBER** UNIT **REC** otherwise specified FC 4 SP AFDC Program Choice Indicator **RSP** Foster Care PD 50 SH Policy Bureau 2.10 PD Foster Care Policy Bureau FC8 **REQ** Federal Eligibility Certification For Adoption Assistance Program EΑ .01 EA FC 10 Income And Property Checklist For Federal Eligibility **REC** Foster Care 50 SH PD Determination-Adoption Assistance Program Policy Bureau 3.37 PD FC 18 Notification of AFDC-FC Transfer **REQ** Foster Care SE .16 SE Policy Bureau FCS 135 Affidavit Of Return Or Exchange Of Food Coupons **REQ** Food Stamp **FREE** SE Bureau FCS 260 Requisition For Food Coupon Books **REQ** Food Stamp SE **FREE** Bureau FCS 300 Advice Of Transfer (Food Coupons) REQ Food Stamp SE **FREE** Bureau FD 258 CCL **FBI Fingerprint Card REQ** Community Care EΑ FREE Licensing Division **REQ FD 258 TLR** Finigerprint Care Community Care EΑ FREE Licensing Division Food Stamp FNS 46 Issuance Reconciliation Report REQ SE **FREE** Bureau FNS 182 USDA Food Assistance **REQ** Food Stamp **FREE** EΑ Bureau FNS 182 SP USDA Food Assistance **REQ** Food Stamp EΑ **FREE** Bureau FNS 183 Food Stamp Poster - Food Stamp Rights **REQ** EΑ **FREE** Bureau **FNS 183 SP** Poster - Food Stamp Rights **REQ** Food Stamp EΑ FREE Bureau **FNS 200** Poster - USDA Food Assistance **REQ** Food Stamp **FREE** EΑ Bureau **FNS 200 SP** Poster-USDA Food Assistance **REQ** Food Stamp EΑ **FREE** Bureau FNS 209 Status Of Claims Against Households REQ Food Stamp EΑ FREE Bureau FNS 250 Food Coupon Accountability Report **REQ** Food Stamp SE **FREE** Bureau FNS 259 Food Stamp Mail Issuance Report **REQ** Food Stamp EΑ **FREE** Bureau FNS 283 **REQ** Food Stamp FREE Poster - Using Food Stamps EΑ Bureau **FNS 283 SP** Poster - Using Food Stamps **REQ** Food Stamp **FREE** EΑ Bureau **REC FNS 313** Food Stamp Program Brochure Food Stamp **FREE** EΑ Bureau **FNS 313 SP** Food Stamp Program Brochure **REC** Food Stamp **FREE** EΑ Bureau FNS 471 Coupon Account And Destruction Report REQ Food Stamp SE FREE Bureau

REC= RECOMMENDED

REQ= REQUIR CHANGE	ED FORM NO RSP= REQUIRED FORM SUBSTITE E PERMITTED WITH PRIOR DSS APPROV.		KEC:	REC= RECOMMENDED FORM		
FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PI or BD unless otherwise specifie	
FS 3	Food Stamp Policy Question	REC	Food Stamp Bureau	МО	MASTER ONLY	
S 4 MULTILINGUAL	Important Notice Please Read	REQ	Food Stamp Bureau	МО	MASTER ONLY	
S 4A MULTILINGUAL	Important Notice Please Read	REQ	Food Stamp Bureau	МО	MASTER ONLY	
S 5	Notice To All Food Stamp Recipients	REC	Food Stamp Bureau	МО	MASTER ONLY	
S 5 SP	Notice To All Food Stamp Recipients	REC	Food Stamp Bureau	МО	MASTER ONLY	
FS 8	Important Information About Required Verifications In The Food Stamp Program	RSP	Food Stamp Bureau	PD	100 SH FREE	
S 8 SP	Important Information About Required Verifications In The Food Stamp Program	RSP	Food Stamp Bureau	PD	100 SH FREE	
S 9	Important Information-Food Stamps	REQ	Food Stamp Bureau	PD	100 SH FREE	
S 9 SP	Important Information-Food Stamps	REQ	Food Stamp Bureau	PD	50 SH FREE	
S 10 IULTILINGUAL	Important Notice To All Food Stamp Recipients	REC	Food Stamp Bureau	МО	MASTER ONLY	
S 10A IULTILINGUAL	Important Notice To All Food Stamp Recipients	REC	Food Stamp Bureau	МО	MASTER ONLY	
S 11 ENG/SP	Notice To All Food Stamp Recipients -	RSP	Food Stamp Bureau	МО	MASTER ONLY	
S 13 ENG/SP	Notice To All Food Stamp Household Members Who Must Pay Child Support Important - Please Read	REC	Food Stamp Bureau	МО	MASTER ONLY	
S 15 ENG/SP	Notice To All Food Stamp Recipients Change In Maximum Excess Shelter Deduction	RSP	Food Stamp Bureau	МО	MASTER ONLY	
S 17 MULTILINGUAL	Notice To All Food Stamp Recipients - Important Information for Legal Immigrants	REQ	Food Stamp Bureau	МО	MASTER ONLY	
S 18 MULTILINGUAL	Important Information	REC	Food Stamp Bureau	МО	MASTER ONLY	
S 19 IULTILINGUAL	Important Information: State-Funded Food Assistance Program	REC	Food Stamp Bureau	МО	MASTER ONLY	
845LA	Document Verification Request Los Angeles	REQ	Fraud Prevention Bureau	EA	FREE	
845SD	Document Verification Request San Diego	REQ	Fraud Prevention Bureau	EA	FREE	
8 845SF	Document Verification Request San Francisco	REQ	Fraud Prevention Bureau	EA	FREE	
GAIN 25	GAIN Monthly Activity Report	REQ	Data Analysis And Publications Branch	МО	MASTER ONLY	
SEN 387A	Request For Publications	REC	Administrative Services Bureau	SE	FREE	
GEN 483	Record Of Manuals Added And Dropped	REC	Administrative Services Bureau	МО	MASTER ONLY	

AMOUNT PER ORDER UNIT REQ ORDER FORM TITLE **PROGRAM** only 100/50 SH per PD or BD unless NUMBER **RSP** CONTACT UNIT **REC** otherwise specified **GEN 727B** County Forms Order **REC** Administrative SE **FREE** Services Bureau Fiscal Systems & Accounting Branch REC PD **GEN 759** County Roster 50 SH **FRFF GEN 827** Work Registration Referral **REQ** Employment MO MASTER ONLY Program Bureau Request For Photocopies Of UIB Or DIB Checks **REQ** Fraud Prevention **GEN 973** EΑ **FREE** Bureau **GEN 1172** REQ Data Analysis MO MASTER ONLY Court Case Statistical Report And Publications Branch **GR 237** General Relief And Interim Assistance To Applicants For SSI/SSP **REQ** Data Analysis MO MASTER ONLY Monthly Caseload And Expenditure Statistical Report Statistical And Publications Branch County Mental Health Department-Interim Assistance To Applicants For SSI/SSP Monthly Caseload And Expenditure Statistical Report 25 SH FREE GR 238 REQ Data Analysis PD And Publications Branch Child Welfare ICPC 100A Interstate Compact Placement Request-Instructions **REQ** SE .28 SE Services Operation Bureau Child Welfare ICPC 100B Interstate Placement Report on Child's Placement Status **REC** SE .26 SE Services Operation Bureau Child Welfare ICPC 100E Interstate Compact Placement Request for Private Placements **REC** SE .32 SE Services Operation Bureau **ICPC 101** Interstate Compact On The Placement Of Children Social RSP Child Welfare MASTER ONLY MO Assessment Of The Child And Family - Outline Services Operation Bureau IRCA 1 Immigration Reform And Control Act Of 1986 (IRCA) Monthly **REQ** Data Analysis MO MASTER ONLY Caseload Report For Eligible Legalized Aliens (ELAs) And Publications Branch ISAWS 7 Monthly Eligibility/Status Report For Cash Aid, Food Stamps, REQ System FΑ .04 FA and Medi-Cal/State-Run County Medical Services Program Support Bureau (CMSP) ISAWS 7 SP Monthly Eligibility/Status Report For Cash Aid, Food Stamps, REQ System MO MASTER ONLY and Medi-Cal/State-Run County Medical Services Program Support Bureau (CMSP) KG₂ Statement Of Facts Supporting Eligibility For Kinship **REQ KinGAP** MO MASTER ONLY Guardianship Assistance Payment Rights, Responsibilities and Other Important For KIN-GAP Program **REQ** KinGAP MO MASTER ONLY KG 2A LIC 100 Facility File Summary Sheet **REC** Community Care PD 50 SH Licensing Division **FREE** LIC 102 Sanitation Inspection Request **REC** Community Care PD 50 SH Licensing Division .60 PD Community Care Licensing Division LIC 107 Applicant Fingerprint Card Follow-Up Request **REC** SE **FREE** Release Of Information **REC** Community Care LIC 122 MO MASTER ONLY Licensing Division

REC= RECOMMENDED

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
LIC 166	Form Letter, Residential Care Facility Requirements Regarding The Overconcentration Of Facilities	REC	Community Care Licensing Division	PD	50 SH FREE
LIC 178	Penalty Review	REQ	Community Care Licensing Division	SE	FREE
LIC 181	Licensing Of Facilities For Children Monthly Statistical Report Foster Family Homes, Family Child Care Homes	REQ	Community Care Licensing Division	PD	50 SH FREE
LIC 183	Forms Request - Childrens Facilities Only	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 183C	Forms Request - Child Care Program	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 184	Notification Of Incomplete Application	REQ	Community Care Licensing Division	SE	.09 SE
LIC 185	Contact Sheet	REC	Community Care Licensing Division	PD	50 SH FREE
LIC 186	Orientation Meeting Tally-Child Care Centers, Child Care Facilities, Residential Care Facility For The Elderly	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 186A	Orientation Meeting Tally, Family Child Care Homes	REC	Community Care Licensing Division	PD	50 SH FREE
LIC 192	Notification Of Initial Application Denial	REQ	Community Care Licensing Division	PD	50 SH .60 PD
LIC 192 SP	Notification Of Initial Application Denial	REQ	Community Care Licensing Division	PD	50 SH .60 PD
LIC 195	Notice Of Operation In Violation Of Law-Child Care Centers, Child Care Facilities, Residential Care Facility For The Elderly	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 195A	Notice Of Operation In Violation Of Law, Family Child Care Homes	REQ	Community Care Licensing Division	SE	FREE
LIC 198 ENG/SP	Child Abuse Central Index Check For County Licensed Facilities	REQ	Community Care Licensing Division	EA	FREE
LIC 198 SP	Child Abuse Central Index Check For County Licensed Facilities	REQ	Community Care Licensing Division	EA	FREE
LIC 200	Application For A Community Care Facility or Residential Care Facility For The Elderly License	REQ	Community Care Licensing Division	PD	50 SH .60
LIC 201F	Annual License Fee Notice (County)	REQ	Community Care Licensing Division	SE/BD	FREE
LIC 203	License To Operate A Facility	REQ	Community Care Licensing Division	PD	50 SH FREE
LIC 203A	License To Operate A Facility (Computer)	REQ	Community Care Licensing Division	SE/BD	FREE
LIC 215	Applicant Information-Facility License	REQ	Community Care Licensing Division	PD	50 SH .60
LIC 215 SP	Applicant Information-Facility License	REQ	Community Care Licensing Division	EA	.05 EA .0121
LIC 279	Family Child Care License Application	REQ	Community Care Licensing Division	PD	50 SH FREE
LIC 279 SP	Family Child Care License Application	REQ	Community Care Licensing Division	PD	50 SH FREE
LIC 279A	Application Booklet For Family Child Care Homes	REQ	Community Care Licensing Division	EA	FREE

AMOUNT PER ORDER UNIT REQ PROGRAM ORDER **FORM** TITLE only 100/50 SH per PD or BD unless **NUMBER RSP** CONTACT UNIT **REC** otherwise specified REQ LIC 279A SP Application Booklet For Family Child Care Homes Community Care EΑ **FREE** Licensing Division Community Care Licensing Division LIC 281 **REQ** FREE Application Booklet For A Facility License EΑ LIC 281C Orientation/Application Process Certification of Completion **REQ** Community Care EΑ **FREE** Licensing Division REQ PD LIC 282 ENG/SP Affidavit Regarding Liability Insurance For Family Child Care Home Community Care 50 SH Licensing Divison **FREE** Community Care Licensing Division LIC 283 REQ PD 50 SH Foster Family Home Application FREE **LIC 283 SP** Foster Family Home Application **REQ** Community Care EΑ FREE Licensing Division Community Care Licensing Division **RSQ** LIC 283A Application Booklet For Foster Family Homes EΑ **FREE** LIC 301 Reference Request RSP Community Care PD 50 SH Licensing Division FREE **REQ** PD LIC 306 Reporting Requirements By Licensees To The State Department Community Care 50 SH Licensing Division **FREE** Of Social Services Community Care Licensing Division LIC 308 Designation Of Facility Responsibility REQ PD 50 SH FREE LIC 309 Administrative Organization **REQ** Community Care PD50 SH Licensing Division **FREE** Community Care Licensing Division LIC 309 SP Administrative Organization **REQ** MO MASTER ONLY Records To Be Maintained At The Facility - Small Family Home REQ Community Care PD LIC 311E 50 SH And Foster Family Home Licensing Division FREE LIC 400 ENG/SP Affidavit Regarding Client/Resident Cash Resources **REQ** Community Care EΑ **EACH** Licensing Division Community Care Licensing Division LIC 400 SP **REQ** MO Affidavit Regarding Client/Resident Cash Resources MASTER ONLY LIC 401 Monthly Operating Statement **REQ** Community Care PD 50 SH Licensing Division FREE LIC 401 SP Monthly Operating Statement **REQ** Community Care MO MASTER ONLY Licensing Division LIC 401A Supplemental Financial Information **REQ** Community Care PD 50 SH Licensing Division **FREE REQ** Community Care LIC 402 Surety Bond PD 50 SH Licensing Divison **FREE** Community Care Licensing Division LIC 403 **REQ** MO MASTER ONLY Balance Sheet-Financial Statement LIC 403 SP Balance Sheet-Financial Statement **REQ** Community Care MO MASTER ONLY Licensing Division REQ Community Care SE LIC 403A **FREE** Balance Sheet Supplemental Schedule Licensing Division Community Care Licensing Division LIC 404 ENG/SP **REQ** EΑ **FREE** Financial Information Release And Verification LIC 404 SP Financial Information Release And Verification REQ Community Care EΑ FREE Licensing Division

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FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
LIC 405	Record of Client's/Resident's Safeguarded Cash Resources	RSP	Community Care Licensing Division	PD	50 SH FREE
LIC 420	Budget Information-Foster Family Homes	RSP	Community Care Licensing Division	PD	50 SH FREE
LIC 420 SP	Budget Information-Foster Family Homes	RSP	Community Care Licensing Division	МО	MASTER ONLY
LIC 421	Civil Penalty Assessment-Licensed Facility	REQ	Community Care Licensing Division	SE	.63 SE
LIC 421A	Civil Penalty Assessment-Unlicensed Facility	REQ	Community Care Licensing Division	SE	.29 SE
LIC 422	Notice of Civil Penalties Due	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 422A	Civil Penalty Ledger	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 423	Evaluator Worksheet Community Care Facility (CCF) Residential Care Facility For The Elderly (RCFE) Financial Records Review	RSP	Community Care Licensing Division	SE	MASTER ONLY
LIC 424	Record of Client's Cash Resources For Change of Licensee	RSP	Community Care Licensing Division	SE	FREE
LIC 500	Personnel Report	RSP	Community Care Licensing Division	PD	50 SH FREE
LIC 500 SP	Personnel Report	RSP	Community Care Licensing Division	PD	50 SH FREE
LIC 501	Personnel Record-Completed by Employee	RSP	Community Care Licensing Division	PD	50 SH FREE
LIC 501 SP	Personnel Record-Completed by Employee	RSP	Community Care Licensing Division	PD	50 SH FREE
LIC 503 ENG/SP	Health Screening Report - Facility Personnel	REQ	Community Care Licensing Division	EA	FREE
LIC 507	Facilities Staff Work Schedule	REQ	Community Care Licensing Division	PD	50 SH FREE
LIC 508	Criminal Record Statement	REQ	Community Care Licensing Division	PD	50 SH FREE
LIC 508 SP	Criminal Record Statement	REQ	Community Care Licensing Division	EA	FREE
LIC 508B	Criminal Record Statement-Foster Family Homes, Certified Family Home	REQ	Community Care Licensing Division		
LIC 601	Identification And Emergency Information	REQ	Community Care Licensing Division	PD	50 SH FREE
LIC 601 SP	Identification And Emergency Information	REQ	Community Care Licensing Division	PD	50 SH .0121
LIC 602	Physician's Report For Community Care Facilities	RSP	Community Care Licensing Division	PD	50 SH FREE
LIC 603	Preplacement Appraisal Information Admission Residential Care Facilities	RSP	Community Care Licensing Division	PD	50 SH FREE
LIC 604	Admission Agreement Guide For Residential Facilities	REQ	Community Care Licensing Division	PD	50 SH FREE

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless
LIC 605A	Release Of Client/Resident Medical Information	REQ	Community Care Licensing Division	PD	otherwise specified 50 SH FREE
LIC 610	Emergency Disaster Plan For Residential Care Facilities For The Elderly, Community Care Facilities & Child Care Centers	REQ	Community Care Licensing Division	SE	FREE
LIC 610 SP	Emergency Disaster Plan For Residential Care Facilities For The Elderly, Community Care Facilities & Child Care Centers	REQ	Community Care Licensing Division	SE	FREE
LIC 610A	Emergency Disaster Plan For Foster Family Homes and Family Child Care Homes	REQ	Community Care Licensing Divison	SE	FREE
LIC 610A SP	Emergency Disaster Plan For Foster Family Homes and Family Child Care Homes	REQ	Community Care Licensing Division	SE	FREE
LIC 613	Personal Rights - Community Care Facilities And Residential Care Facilities For The Elderly	REQ	Community Care Licensing Division	PD	50 SH FREE
LIC 613 SP	Personal Rights - Community Care Facilities And Residential Care Facilities For The Elderly	REQ	Community Care Licensing Division	PD	50 SH FREE
LIC 613A	Personal Rights - Child Care Facilities	REQ	Community Care Licensing Division	PD	50 SH FREE
LIC 613A SP	Personal Rights - Child Care Facilities	REQ	Community Care LicensingDivision	PD	50 SH FREE
LIC 621	Client Resident Personal Property And Valuables	REQ	Community Care Licensing Division	PD	50 SH FREE
LIC 622	Centrally Stored Medication And Destruction Record	REQ	Community Care Licensing Division	PD	50 SH FREE
LIC 622 SP	Centrally Stored Medication And Destruction Record	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 623	Group Planned Activities	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 623 SP	Group Planned Activities	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 624	Unusual Incident/Injury/Death Report	RSP	Community Care Licensing Division	PD	50 SH FREE
LIC 624A	Death Report	REQ	Community Care Licensing Division		FREE
LIC 625	Appraisal Needs and Services Plan	REQ	Community Care Licensing Division	PD	50 SH FREE
LIC 625 SP	Appraisal Needs and Services Plan	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 627ENG/SP	Consent For Emergency Medical Treatment	REQ	Community Care Licensing Division	PD	50 SH FREE
LIC 627 SP	Consent For Emergency Medical Treatment	REQ	Community Care Licensing Division	PD	50 SH FREE
LIC 627A	Consent To A Medical Examination	REQ	Community Care Licensing Division	PD	50 SH FREE
LIC 627A SP	Consent To A Medical Examination	REQ	Community Care Licensing Division	PD	50 SH FREE
LIC 627B ENG/SP	Consent For Emergency Medical Treatment - Children's Residential Facilities	REQ	Community Care Licensing Division	PD	50 SH FREE
LIC 627B SP	Consent For Emergency Medical Treatment - Children's Residential Facilities	REQ	Community Care Licensing Division	PD	50 SH FREE

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FORM

AMOUNT PER ORDER UNIT REQ PROGRAM ORDER FORM TITLE only 100/50 SH per PD or BD unless **NUMBER RSP** CONTACT UNIT **REC** otherwise specified LIC 700 ENG/SP PD Identification And Emergency Information Child Care Center/ **REQ** Community Care 50 SH Family Child Care Homes Licensing Division FREE Identification And Emergency Information Child Care Center/Family Child Care Homes Community Care Licensing Division LIC 700 SP **REQ** PD 50 SH FREE Community Care Licensing Division Gastrostomy - Tube Care: Physician's Checklist LIC 701A **REQ** MO MASTER ONLY Child Care Facilities Gastrostomy - Tube Care Consent/Verification MO LIC 701B REQ Community Care MASTER ONLY Licensing Division Child Care Facilities Community Care Licensing Division LIC 702 Child's Preadmission Health History-Parent's Report **REQ** PD 50 SH FREE Community Care Licensing Division LIC 702 SP Child's Preadmission Health History-Parent's Report **REQ** MO MASTER ONLY 50 SH .60 PD Community Care Licensing Division PD LIC 802 Complaint Report REQ Community Care Licensing Division LIC 809 Facility Evaluation Report **REQ** SE .12 SE Community Care Licensing Division LIC 811 **REQ** SE Confidential Names .04 SE Community Care Licensing Division LIC 812 **Detail Supportive Information** RSP PD 50 SH FREE Community Care Licensing Division LIC 813 **REQ** PDFacility Photography Report 50 SH **FREE** Community Care Licensing Division LIC 855 Declaration **REQ** MO MASTER ONLY **RSP** Community Care SE LIC 856 Complaint Response .64 SE Licensing Division LIC 858 Client /Resident Records Review (Residential) **REQ** Community Care SE FREE Licensing Division Community Care Licensing Division Additional Child Records Review for Specialized Foster Care **RSP** SE **FREE** LIC 858A Homes LIC 859 Review Of Staff/Volunteer Records **RSP** Community Care SE .07 SE Licensing Division Community Care Licensing Division LIC 860C Facility Review Index-Foster Family Homes **REQ** MO MASTER ONLY Community Care Licensing Division LIC 907 Transmittal For Processing **RSP** PD 50 SH **FREE RSP** Community Care LIC 908 Facility File Folder Tabs-Licensing Reports-Public SE **FREE** Licensing Division Community Care Licensing Division RSP SE LIC 908A Facility File Folder Inserts For The Confidential Files **FREE** LIC 908B Facility File Divider Tabs **RSP** Community Care SE **FREE** Licensing Division **REC** Community Care PD LIC 924 File Cross Reference Control 50 SH FREE Licensing Division Community Care Licensing Division LIC 946 Summary of Audit Adjustment (Audits) **RSP** EΑ **FREE RSP** PDLIC 956 Facility Waiver Request Community Care 50 SH Licensing Division .60 PD

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FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
LIC 957	Complaint Control Log	REQ	Community Care Licensing Division	PD	50 SH .60
LIC 967	Subpoena Duces Tecum	REQ	Community Care Licensing Division	EA	FREE
LIC 971	Exception/Exemption Request	REQ	Community Care Licensing Division	SE	.18 SE
LIC 972	Individual Waiver Exception Log	REQ	Community Care Licensing Division	PD	50 SH .60 PD
LIC 981	Weekly Itinerary	RSP	Community Care Licensing Division	PD	50 SH FREE
LIC 986A	Notice Of Revocation Action	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 989	Information Request	REQ	Community Care Licensing Division	PD	50 SH .60 PD
LIC 995A ENG/SP	Family Child Care Home Notification Of Parent's Rights	REQ	Community Care Licensing Division	PD	50 SH FREE
LIC 995A SP	Family Child Care Home Notification Of Parent's Rights	REQ	Community Care Licensing Division	PD	50 SH FREE
LIC 995B	Family Child Care Home Addendum to Notification of Parent's Rights (Regarding Exclusion)	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 995B SP	Family Child Care Home Addendum to Notification of Parent's Rights (Regarding Exclusion)	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 995C	Family Child Care Home Notification Of Parent's Rights Addendum To Reinstate	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 995C SP	Family Child Care Home Notification Of Parent's Rights Addendum To Reinstate	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 995D	Family Child Care Home Explanation of Exclusions And Reinstatement	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 995D SP	Family Child Care Home Explanation of Exclusions And Reinstatement	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 996	Agreement For Licensure Of Community Care Facility/Child Care Facility On Federal Property	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 996A	Agreement For Licensure Of Community Care Facility/Child Care Facility On Indian Reservations	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 997	Agreement By Licensee/Applicant On Federal Property	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 997A	Agreement By Licensee/Applicant On Indian Reservations	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 999	Facility Sketch Floor Plan	RSP	Community Care Licensing Division	PD	50 SH FREE
LIC 999 SP	Facility Sketch Floor Plan	RSP	Community Care Licensing Division	PD	50 SH FREE
LIC 1000	Information Release Form-Audits	REQ	Community Care Licensing Division	EA	FREE
LIC 1002	Notice To Licensee Intent To Transmit Audit Report	RSP	Community Care Licensing Division	EA	FREE
LIC 9008	Investigation Chronology	REQ	Community Care Licensing Division	EA	FREE

AMOUNT PER ORDER UNIT REQ PROGRAM ORDER FORM TITLE only 100/50 SH per PD or BD unless otherwise specified NUMBER **RSP** CONTACT UNIT **REC RSP** LIC 9011A Department of Justice Notification Community Care MO MASTER ONLY Licensing Division Community Care Licensing Division LIC 9015 **REQ** FREE Legal Case Transmittal EΑ Community Care Licensing Division LIC 9016 Investigators Monthly Time And Stat Report REC EΑ **FREE** MASTER ONLY LIC 9020 Register Of Facility Client/Residents **RSP** Community Care MO Licensing Division Community Care Licensing Division CCL Media Inquiry **RSP** MO MASTER ONLY LIC 9021 LIC 9029A Statement Of Facts Summary Sheet **REQ** Community Care SE **FREE** Licensing Division Community Care Licensing Division **RSP** LIC 9031 Notice-Temporary Suspension Order Of License EΑ **FREE** Child Care Facility Roster (Retain For 3 Years) RCFE, GH, ARF, RCFE CEU, ARF CEU Community Care Licensing Division LIC 9040 RSP EΑ FREE ENG/SP Child Care Facility Roster (Retain For 3 Years) RCFE, GH, ARF, RCFE CEU, ARF CEU LIC 9040 SP **RSP** Community Care EΑ FREE Licensing Division Community Care Licensing Division LIC 9041 Child Day Care Facility Roster RSP EΑ **FREE** Community Care Licensing Division LIC 9052 Notice of Employee Rights **REQ** PD50 SH **FREE** Community Care Licensing Division LIC 9052 SP Notice Employee Rights **REQ** MO MASTER ONLY Local Fire Inspection Authority Information Required By The REQ Community Care PD LIC 9054 50 SH ENG/SP Department Of Social Services, Community Care Licensing Licensing Division FREE LIC 9054 SP Local Fire Inspection Authority Information Required By The **REQ** Community Care PD 50 SH Department Of Social Services, Community Care Licensing Licensing Division **FREE** Community Care Licensing Division LIC 9056 Operation Plan **REC** EΑ **FREE** LIC 9057 Evidence Receipt/Report **REC** Community Care EΑ FREE Licensing Division Community Care Licensing Division LIC 9058 Applicant/Licensees Right & Appeal Rights **REC** PD 50 SH **FREE** LIC 9058 SP Applicant/Licensees Right & Appeal Rights **REC** Community Care MO MASTER ONLY Licensing Division Community Care LIC 9081 Cash Review Confirmation(Audits) **REC** EΑ **FREE** Licensing Division Community Care Licensing Division RSP LIC 9082 EΑ Receipt For Delivery Of Records (Audits) **FREE** LIC 9083 Request For Current Address **RSP** Community Care EΑ **FREE** Licensing Division **RSP** Community Care LIC 9092 Fire Pre-Inspection/Consultation Request EΑ **FREE** Licensing Division LIC 9098 Proof Of Correction(s) **REC** Community Care PD 50 SH Licensing Division FREE

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FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
LIC 9099	Complaint Investigation Report	RSP	Community Care Licensing Division	SE	FREE
LIC 9099A	Complaint Investigation Report	REC	Community Care Licensing Division	EA	FREE
LIC 9102	Advisory Notes	RSP	Community Care Licensing Division	SE	FREE
LIC 9104	LIS Input Sheet	RSP	Community Care Licensing Division	PD	50 SH FREE
LIC 9108	Statement Acknowledging Requirement to Report Suspected Child Abuse	REQ	Community Care Licensing Division	SE	FREE
LIC 9108 SP	Statement Acknowledging Requirement to Report Suspected Child Abuse	RSP	Community Care Licensing Division	SE	FREE
LIC 9111	Noncompliance Conference Summary	RSP	Community Care Licensing Division	EA	FREE
LIC 9112	Facility Compliance Plan	RSP	Community Care Licensing Division	PD	50 SH FREE
LIC 9117	Emergency Approval To Operate	REC	Community Care Licensing Division	EA	FREE
LIC 9121	Annual License Visit Checklist Family Child Care	RSP	Community Care Licensing Division	МО	MASTER ONLY
LIC 9122	Annual License Visit Checklist Small Family Home, Foster Family Home	RSP	Community Care Licensing Division	МО	MASTER ONLY
LIC 9125	Technical Support Unit Conslultation Notes	REC	Community Care Licensing Division	EA	FREE
LIC 9126	Receipt For Funds Delivered	REQ	Community Care Licensing Division	EA	FREE
LIC 9131	Request To Delete Personnel Or Facilities	RSP	Community Care Licensing Division	МО	MASTER ONLY
LIC 9139	Renewal of Continuing Education Course Approval	REQ	Community Care Licensing Division	EA	FREE
LIC 9148	Earthquake Preparedness Checklist	REC	Community Care Licensing Division	EA	FREE
LIC 9148 SP	Earthquake Preparedness Checklist	REC	Community Care Licensing Division	EA	FREE
LIC 9149	Family Child Care Home Property Owner/ Landlord Consent Form	REC	Community Care Licensing Division	EA	FREE
LIC 9149 SP	Family Child Care Home Property Owner/ Landlord Consent Form	REC	Community Care Licensing Division	EA	FREE
LIC 9150 ENG/SP	Parent Notification Additional Children In Care	REC	Community Care Licensing Division	EA	FREE
LIC 9150 SP	Parent Notification Additional Children In Care	REC	Community Care Licensing Division	EA	FREE
LIC 9151 ENG/SP	Family Child Care Home Property Owner/Landlord Notification	REC	Community Care Licensing Division	EA	FREE
LIC 9151SP	Family Child Care Home Property Owner/Landlord Notification	REC	Community Care Licensing Division	EA	FREE
LIC 9158	Telecommunications Device Notification	REC	Community Care Licensing Division	SE	FREE

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FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
LIC 9159	Use of Criminal Justice Information	REC	Community Care Licensing Division	EA	FREE
LIC 9160	Use of DMV Record Information	REC	Community Care Licensing Division	EA	FREE
LIC 9161	Regional Investigation Section Ten-Day On-Site Complaint Visit	REC	Community Care Licensing Division	SE	FREE
LIC 9163	Request For Live Scan Services	REC	Community Care Licensing Division	SE	FREE
LIC 9163 SP	Request For Live Scan Services	REC	Community Care Licensing Division	SE	FREE
LIC 9166 ENG/SP	Child Care Facilities: Consent/Verification Form For Nebulizer Care (CCC, FCCH)	REC	Community Care Licensing Division	МО	MASTER ONLY
LIC 9166 SP	Child Care Facilities: Consent/Verification Form For Nebulizer Care (CCC, FCCH)	REC	Community Care Licensing Division	МО	MASTER ONLY
LIC 9167	Revocation Letterhead	REC	Community Care Licensing Division	EA	FREE
LIC 9168	Forfeiture Letterhead	REC	Community Care Licensing Division	EA	FREE
LIC 9169	Overdue Letterhead	REQ	Community Care Licensing Division	EA	FREE
LIC 9172	Functional Capability Assessment	REC	Community Care Licensing Division	EA	FREE
LIC 9177	Authorization-Release Name & Mail Address	REC	Community Care Licensing Division	EA	FREE
LIC 9182	Criminal Background Clearance Transfer Request	REC	Community Care Licensing Division	EA	FREE
LIC 9184	Fingerprint Card Instructions For County Licensed Facilties	REQ	Community Care Licensing Division	EA	FREE
LIC 9184 SP	Fingerprint Card Instructions For County Licensed Facilties	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 9186	Client Death Report	REC	Community Care Licensing Division	МО	MASTER ONLY
LIC 9187	Child Care Client Death Report	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 9188	Criminal Record Exemption Transfer Request	REC	Community Care Licensing Division	EA	FREE
LIC 9191	Certificate of Eligibility-Substitute Employee Registry	REQ	Community Care Licensing Division	EA	FREE
LIC 9193	License Pending Notice (Overdue Application Letter-FCCH)	REQ	Community Care Licensing Division	EA	FREE
LIC 9193 SP	License Pending Notice (Overdue Application Letter-FCCH)	REQ	Community Care Licensing Division	EA	FREE
LIC 9195	Continuation of FCCH License Letter	REQ	Community Care Licensing Division	EA	FREE
LIC 9195 SP	Continuation of FCCH License Letter	REQ	Community Care Licensing Division	EA	FREE

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
LIC 9196	Authorization To Release Criminal Background/ Clearance Information	REQ	Community Care Licensing Division	МО	MASTER ONLY
LIC 9197	Request For Criminal Background/Clearance Inforamtion	REC	Community Care Licensing Division	МО	MASTER ONLY
M44-315	Notice Of Action - Law Change-Increase in MAP	RSP	CalWORKs Eligibility Bureau	MO	MASTER ONLY
M44-315 SP	Notice Of Action - Law Change-Increase in MAP	RSP	CalWORKs Eligibility Bureau	MO	MASTER ONLY
NA 200	Notice Of Action (Multi Purpose-Includes Budget)	RSP	CalWORKs Eligibility Bureau	MO	MASTER ONLY
NA 200 SP	Notice Of Action (Multi Purpose-Includes Budget)	RSP	CalWORKs Eligibility Bureau	MO	MASTER ONLY
NA 210	Notice Of Action: Discontinue, Suspend - Financial Eligibility	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 210 SP	Notice Of Action: Discontinue, Suspend - Financial Eligibility	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 213	Notice Of Action:Deny - Financial Eligibility	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 213 SP	Notice Of Action:Deny - Financial Eligibility	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 214	Notice Of Action: Discontinue/Suspend - Transfer Of Property	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 214 SP	Notice Of Action: Discontinue/Suspend - Transfer Of Property	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 214A	Notice Of Action - Discontinuance - Transfer Of Income	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 215	Notice Of Action (Continued): Sponsored Non-Citizens (Deemed Income)	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 215 SP	Notice Of Action (Continued): Sponsored Non-Citizens (Deemed Income)	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 216	Notice Of Action - Sponsored Non-Citizens (Property)	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 216 SP	Notice Of Action - Sponsored Non-Citizens (Property)	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 217	Notice Of Action - Diversion	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 217 SP	Notice Of Action - Diversion	RSP	CalWORKs Eligibility Bureau	MO	MASTER ONLY
NA 218	Notice Of Action (Continued): Sponsored Non-Citizens (Deemed Property)	RSP	CalWORKs Eligibility Bureau	MO	MASTER ONLY
NA 218 SP	Notice Of Action (Continued): Sponsored Non-Citizens (Deemed Property)	RSP	CalWORKs Eligibility Bureau	MO	MASTER ONLY
NA 219	Notice Of Action - Property	RSP	CalWORKs Eligibility Bureau	MO	MASTER ONLY
NA 219 SP	Notice Of Action - Property	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY

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FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
NA 270	Continuation Page	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 270 SP	Continuation Page	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 271	Notice Of Action - (Continued): Family Income Computations - Cash Aid	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 271 SP	Notice Of Action - (Continued): Family Income Computations - Cash Aid	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 274	Notice Of Action - Continuation Page - Overpayment Computations	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 274 SP	Notice Of Action - Continuation Page - Overpayment Computations	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 274B	Notice Of Action - Continuation Page - Overpayment Computations	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 274B SP	Notice Of Action - Continuation Page - Overpayment Computations	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 274C	Notice Of Action - Continuation Page-Overpayment Computations	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 274C SP	Notice Of Action - Continuation Page - Overpayment Computations	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 274D	Notice Of Action (Continued): Overpayment Computations (Ortega 9/1/95 - 12/30/97)	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 274D SP	Notice Of Action (Continued): Overpayment Computations (Ortega 9/1/95 - 12/30/97)	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 274E	Notice Of Action (Continued): Overpayment Computations For 1/1/98 And After	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 274E SP	Notice Of Action (Continued): Overpayment Computations For 1/1/98 And After	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 275	Notice Of Action - Continuation Page (Overpayment Adjustment Computation - Cash Aid)	REQ	CalWORKs Eligibility Bureau	SE	.26 SE
NA 275 SP	Notice Of Action - Continuation Page (Overpayment Adjustment	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 277	Notice Of Action - Continuation Page - Optional Persons Transfer Of Property	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 277 SP	Notice Of Action - Continuation Page - Optional Persons Transfer Of Property	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 278	Notice Of Action - Discontinued/Suspend - Optional Persons Transfer Of Property	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 278 SP	Notice Of Action - Discontinued/Suspend - Optional Persons Transfer Of Property	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 279	Notice Of Action - Excess Property (With Good Faith)	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 279 SP	Notice Of Action - Excess Property (With Good Faith)	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 280	Notice Of Action (Continued): Excess Property (Without Good Faith)	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 280 SP	Notice Of Action (Continued): Excess Property (Without Good Faith)	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
NA 281	Notice Of Action - (Continued) Underpaym ent	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 281 SP	Notice Of Action - (Continued) Underpayment	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 290	Notice Of Action - Multipurpose	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 290 SP	Notice Of Action - Multipurpose	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 300	Continuation Page - Financial Eligibility/185% Test	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 300 SP	Continuation Page - Financial Eligibility/185% Test	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 301	Notice Of Action (Continued): Applicant Financial Eligibility Test	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 301 SP	Notice Of Action (Continued): Applicant Financial Eligibility Test	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 690	In Home Supportive Services Notice Of Action	RSP	Adult Services Management Branch	МО	MASTER ONLY
NA 690 SP	In Home Supportive Services Notice Of Action	RSP	Adult Services Management Branch	МО	MASTER ONLY
NA 690A	In Home Supportive Services Notice Of Action - Denial	RSP	Adult Services Management Branch	МО	MASTER ONLY
NA 690A SP	In Home Supportive Services Notice Of Action - Denial	RSP	Adult Services Management Branch	МО	MASTER ONLY
NA 690B	In Home Supportive Services Notice Of Action - Reassessment	RSP	Adult Services Management Branch	МО	MASTER ONLY
NA 690B SP	In Home Supportive Services Notice Of Action - Reassessment	RSP	Adult Services Management Branch	МО	MASTER ONLY
NA 690C	In Home Supportive Services Notice Of Action-Discontinuance	RSP	Adult Services Management Branch	МО	MASTER ONLY
NA 690C SP	In Home Supportive Services Notice Of Action Discontinuance	RSP	Adult Services Management Branch	МО	MASTER ONLY
NA 691	Notice Of Denial - Cash Assistance Program For Immigrants (CAPI)	REQ	Adult Programs Branch	МО	MASTER ONLY
NA 691 SP	Notice Of Denial - Cash Assistance Program For Immigrants (CAPI)	REQ	Adult Programs Branch	МО	MASTER ONLY
NA 692	Notice Of Change - Cash Assistance Program For Immigrants (CAPI)	REQ	Adult Programs Branch	МО	MASTER ONLY
NA 692 SP	Notice Of Change - Cash Assistance Program For Immigrants (CAPI)	REQ	Adult Programs Branch	МО	MASTER ONLY
NA 693	Notice Of Approval - Cash Assistance Program For Immigrants (CAPI)	REQ	Adult Programs Branch	МО	MASTER ONLY

AMOUNT PER ORDER UNIT **ORDER FORM** TITLE **REQ PROGRAM** only 100/50 SH per PD or BD unless otherwise specified **NUMBER RSP** CONTACT UNIT **REC** NA 693 SP Notice Of Approval - Cash Assistance Program **REQ** Adult Programs MO MASTER ONLY For Immigrants (CAPI) Branch .08 EA NA 791 AAP - Approval/Denial/Change **REQ** Adoptions EΑ Policy Bureau Adoptions Policy Bureau NA 791 SP AAP Approval/Denial/Change **RSP** EΑ .03 EA NA 801 ENG/SP Notice Of Action GAIN (Manual Process) **REQ Employment** MO MASTER ONLY Program Bureau NA 802 ENG/SP Notice Of Action GAIN (Automated) REQ Employment MO MASTER ONLY Program Bureau Employment Program Bureau NA 803 ENG/SP Notice Of Action GAIN (Continuation Page) **REQ** MO MASTER ONLY NA 804 ENG/SP Non-GAIN Education Or Training Notice Of Action (Blank) REQ Employment MO MASTER ONLY Program Bureau NA 805 ENG/SP REQ Employment MO MASTER ONLY Notice Of Action To Approve NET Programs Program Bureau NA 814 ENG/SP Notice of Action - NET SCC 2 Incomplete Request **REQ** Child Care MO MASTER ONLY **Programs** NA 816 Notice Of Action - Sanction 2nd Parent REQ Employment MO MASTER ONLY Buréau NA 816 SP REQ **Employment** MASTER ONLY Notice Of Action - Sanction 2nd parent MO Bureauu NA 817 Notice Of Action - Sanction Of AFDC-FG Registrant **RSP** Employment MO MASTER ONLY Buréau NA 817 SP **RSP** MASTER ONLY Employment MO Notice Of Action - Sanction Of AFDC-FG Registrant Buréau NA 818 Notice Of Action - Sanction Of Volunteer Target **RSP** Employment MO MASTER ONLY Buréau **RSP** Employment NA 818 SP Notice Of Action - Sanction Of Volunteer Target MO MASTER ONLY Bureau NA 820 Notice Of Action - Transportation Approval **RSP Employment** MO MASTER ONLY Buréau NA 820 SP Notice Of Action - Transportation Approval **RSP** Employment MO MASTER ONLY Buréau Employment Bureau RSP NA 821 Notice Of Action - Transportation Approval/Denial MO MASTER ONLY NA 821 SP **RSP Employment** MASTER ONLY Notice Of Action - Transportation Approval/Denial MO Bureauu **RSP** NA 822 Notice Of Action - Transportation Change Employment MO MASTER ONLY Bureau NA 822 SP **RSP Employment** MO MASTER ONLY Notice Of Action - Transportation Change Bureauu NA 823 Notice Of Action - ancillary Expenses Approval/Denial **RSP** Employment MO MASTER ONLY Buréau NA 823 SP RSP MO MASTER ONLY Notice Of Action - ancillary Expenses Approval/Denial Employment Buréau

REC= RECOMMENDED

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
NA 824	Notice Of Action - Extension Of Transportation	RSP	Employment Bureau	МО	MASTER ONLY
NA 824 SP	Notice Of Action - Extension Of Transportation	RSP	Employment Bureau	МО	MASTER ONLY
NA 825	Notice Of Action - Payment Adjust Transportation	RSP	Employment Bureau	МО	MASTER ONLY
NA 825 SP	Notice Of Action - Payment Adjust Transportation	RSP	Employment Bureau	МО	MASTER ONLY
NA 827	Notice Of Action - Recoupment Unused Advance Payment	RSP	Employment Bureau	МО	MASTER ONLY
NA 827 SP	Notice Of Action - Recoupment Unused Advance Payment	RSP	Employment Bureau	МО	MASTER ONLY
NA 828	Notice Of Action - Transportation And Ancillary Exp Overpayment	RSP	Employment Bureau	МО	MASTER ONLY
NA 828 SP	Notice Of Action - Transportation And Ancillary Exp Overpayment	RSP	Employment Bureau	МО	MASTER ONLY
NA 832	Notice Of Action - Approval	REC	Employment Bureau	МО	MASTER ONLY
NA 832 SP	Notice Of Action - Approval	REC	Employment Bureau	МО	MASTER ONLY
NA 833	Notice Of Action - Child Care Payments	REC	Employment Bureau	МО	MASTER ONLY
NA 833 SP	Notice Of Action - Child Care Payments	REC	Employment Bureau	МО	MASTER ONLY
NA 834	Notice Of Action - Denial	REC	Employment Bureau	МО	MASTER ONLY
NA 834 SP	Notice Of Action - Denial	REC	Employment Bureau	МО	MASTER ONLY
NA 835	Notice Of Action - Stop Payment	REC	Employment Bureau	МО	MASTER ONLY
NA 835 SP	Notice Of Action - Stop Payment	REC	Employment Bureau	МО	MASTER ONLY
NA 840	Notice Of Action - Sanction Of Mandatory Participant/ Good Cause/Compliance	REQ	Employment Bureau	МО	MASTER ONLY
NA 840 SP	Notice Of Action - Sanction Of Mandatory Participant/ Good Cause/Compliance	REQ	Employment Bureau	МО	MASTER ONLY
NA 841	Notice Of Action - Suspension Of Volunteer/Compliance	RSP	Employment Bureau	МО	MASTER ONLY
NA 841 SP	Notice Of Action - Suspension Of Volunteer/Compliance	RSP	Employment Bureau	МО	MASTER ONLY
NA 843	Notice Of Action - Ineligible	REQ	Teen Programs	МО	MASTER ONLY
NA 843 SP	Notice Of Action - Ineligible	REQ	Teen Programs	МО	MASTER ONLY
NA 844	Notice Of Action - Adequate Progress	RSP	Teen Programs	МО	MASTER ONLY
NA 844 SP	Notice Of Action - Adequate Progress	RSP	Teen Programs	МО	MASTER ONLY
NA 845	Notice Of Action -Removal Of Second Parent's Needs/Compliance	RSP	Employment Bureau	МО	MASTER ONLY

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
NA 845 SP	Notice Of Action -Removal Of Second Parent's Needs/Compliance	RSP	Employment Bureau	МО	MASTER ONLY
NA 960X	CA 7 Not Received	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 960X SP	CA 7 Not Received.	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 960Y	Stop Aid - Report Incomplete (CA 7)	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 960Y SP	Stop Aid - Report Incomplete (CA 7)	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 981	Child Welfare Services Notice Of Action	REQ	Child Welfare Services Operations Bureau	SE	.14 SE
NA 981 SP	Child Welfare Services Notice Of Action	REQ	Child Welfare Services Operations Bureau	МО	MASTER ONLY
NA 982	CWS Notice Of Action Services	REQ	Family & Children Services Policy Bureau	SE	.13 SE
NA 982 SP	CWS Notice Of Action Services	REQ	Family & Children Services Policy Bureau	МО	MASTER ONLY
NA 990	Notice of Action (Master for use in automated NOA production)	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 990 SP	Notice of Action (Master for use in automated NOA production)	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
NA 991	Notice Of Action -RCA/ECA MC-Decrease/Expiration (Time Expiration)	REQ	Refugee & Immigration Program Bureau	МО	MASTER ONLY
NA 991 SP	Notice Of Action -RCA/ECA MC-Decrease/Expiration (Time Expiration)	REQ	Refugee & Immigration Program Bureau	МО	MASTER ONLY
NA 992	Notice Of Action - Refugee Cash Assistance Application Approval	REQ	Refugee & Immigration Program Bureau	МО	MASTER ONLY
NA 992 SP	Notice Of Action - Refugee Cash Assistance Application Approval	REQ	Refugee & Immigration Program Bureau	МО	MASTER ONLY
NA 994	Notice Of Action - Food Stamp Notice of Discontinuance	RSP	Employment Bureau	МО	MASTER ONLY
NA 994 SP	Notice Of Action - Food Stamp Notice of Discontinuance	RSP	Employment Bureau	МО	MASTER ONLY
NA 995	Notice Of Action - Food Stamp Notice of Denial/Disqualification For The California Food Assistance Program	RSP	Employment Bureau	МО	MASTER ONLY
NA 995 SP	Notice Of Action - Food Stamp Notice of Denial/Disqualification For The California Food Assistance Program	RSP	Employment Bureau	МО	MASTER ONLY
NA 996	Notice Of Action - Food Stamp Notice of Discontinuance	RSP	Employment Bureau	МО	MASTER ONLY
NA 996 SP	Notice Of Action - Food Stamp Notice of Discontinuance	RSP	Employment Bureau	МО	MASTER ONLY

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
NA 1205	Notice Of Action - Approval Notice	REQ	Foster Care Branch	МО	MASTER ONLY
NA 1205 SP	Notice Of Action - Approval Notice	REQ	Foster Care Branch	МО	MASTER ONLY
NA 1206	Notice Of Action - Information Notice	REQ	Foster Care Branch	МО	MASTER ONLY
NA 1206 SP	Notice Of Action - Information Notice	REQ	Foster Care Branch	МО	MASTER ONLY
NA 1207	Notice Of Action - Reimbursement	REQ	Foster Care Branch	МО	MASTER ONLY
NA 1207 SP	Notice Of Action - Reimbursement	REQ	Foster Care Branch	МО	MASTER ONLY
NA 1208	Notice Of Action - Basic Approval	REQ	Foster Care Branch	МО	MASTER ONLY
NA 1208 SP	Notice Of Action - Basic Approval	REQ	Foster Care Branch	МО	MASTER ONLY
NA 1209	Notice Of Action - Change	REQ	Foster Care Branch	МО	MASTER ONLY
NA 1210	Notice Of Action - Discontinue Kin-GAP	REQ	Foster Care Branch	МО	MASTER ONLY
NA 1210 SP	Notice Of Action - Discontinue Kin-GAP	REQ	Foster Care Branch	МО	MASTER ONLY
NA 1211	Notice Of Action - Deny Kin-GAP	REQ	Foster Care Branch	МО	MASTER ONLY
NA 1211 SP	Notice Of Action - Deny Kin-GAP	REQ	Foster Care Branch	МО	MASTER ONLY
NA 1212	Notice Of Action - Cash Aid	REQ	Foster Care Branch	МО	MASTER ONLY
NA 1212 SP	Notice Of Action - Cash Aid	REQ	Foster Care Branch	МО	MASTER ONLY
NA 1213	Notice Of Action - Discontinue Restricted Account	REQ	Foster Care Branch	МО	MASTER ONLY
NA 1213 SP	Notice Of Action - Discontinue Restricted Account	REQ	Foster Care Branch	МО	MASTER ONLY
NA 1214	Notice Of Action - Overpayment	REQ	Foster Care Branch	МО	MASTER ONLY
NA 1214 SP	Notice Of Action - Overpayment	REQ	Foster Care Branch	МО	MASTER ONLY
NA 1215	Notice Of Action - Food Stamp Notice Of Change	RSP	Food Stamp Bureau	МО	MASTER ONLY
NA 1215 SP	Notice Of Action - Food Stamp Notice Of Change	RSP	Food Stamp Bureau	МО	MASTER ONLY
NA 1216	Notice Of Action - Food Stamp Notice Of Change	RSP	Food Stamp Bureau	МО	MASTER ONLY
NA 1216 SP	Notice Of Action - Food Stamp Notice Of Change	RSP	Food Stamp Bureau	МО	MASTER ONLY
NA 1217	Notice Of Action - Cash Assistance Program For Immigrants (CAPI) Notice Of Overpayment	REC	Adult Programs Branch	МО	MASTER ONLY

REC= RECOMMENDED

REC= RECOMMENDED

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
NA 1217 SP	Notice Of Action - Cash Assistance Program For Immigrants (CAPI) Notice Of Overpayment	REC	Adult Programs Branch	МО	MASTER ONLY
NA 1218	Notice Of Action - Cash Assistance Program For Immigrants (CAPI) Notice Of Underpayment	REC	Adult Programs Branch	МО	MASTER ONLY
NA 1218 SP	Notice Of Action - Cash Assistance Program For Immigrants (CAPI) Notice Of Underpayment	REC	Adult Programs Branch	МО	MASTER ONLY
NA 1230	Cash Assistance Program For Immigrants (CAPI) Notice Of Overpayment - Weiver Approval	REQ	Adult Programs Branch	МО	MASTER ONLY
IA 1230 SP	Cash Assistance Program For Immigrants (CAPI) Notice Of Overpayment - Weiver Approval	REQ	Adult Programs Branch	МО	MASTER ONLY
NA 1231	Cash Assistance Program For Immigrants (CAPI) Notice Of Overpayment - Partial Weiver Approval	REQ	Adult Programs Branch	МО	MASTER ONLY
IA 1231 SP	Cash Assistance Program For Immigrants (CAPI) Notice Of Overpayment - Partial Weiver Approval	REQ	Adult Programs Branch	МО	MASTER ONLY
IA 1232	Cash Assistance Program For Immigrants (CAPI) Notice Of Overpayment - Waiver Denial	REQ	Adult Programs Branch	МО	MASTER ONLY
IA 1232 SP	Cash Assistance Prog;ram For Immigrants (CAPI) Notice Of Overpayment - Waiver Denial	REQ	Adult Programs Branch	МО	MASTER ONLY
A BACK 9	Your Hearing Rights/How To Ask For A State Hearing	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
IA BACK 9 SP	Your Hearing Rights/How To Ask For A State Hearing	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
ORR 3 PAGE 1	Refugee And Entrant Unaccompanied Minor Placement Report	REQ	Refugee & Immigration Program Bureau	SE	FREE
PRR 3 PAGE 2	Refugee And Entrant Unaccompanied Minor Placement Report Form	REQ	Refugee & Immigration Program Bureau	SE	FREE
ORR 4	Refugee And Entrant Unaccompanied Minor Progress Report	REQ	Refugee & Immigration Program Bureau	SE	FREE
M 357	CHDP Referral Form	RSP	CalWORKs Eligibility Bureau	SE	FREE
UB 3 BI	Adoption Open Your Heart To A Waiting Child	REQ	Adoptions Recruitment & Community Services Bureau	EA	FREE
PUB 13	Your Rights	REQ	Administrative Adjudications Operations Support Bureau	EA	FREE
UB 13 SP	Your Rights	REQ	Administrative Adjudications Operations Support Bureau	EA	FREE
UB 50	Adoption In California	REQ	Adoptions Recruitment & Community Services Bureau	EA	FREE

FAR.			BB		AMOUNT PER ORDER UNIT
FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	only 100/50 SH per PD or BD unless otherwise specified
PUB 50 SP	Adoption In California	REQ	Adoptions Recruitment & Community Services Bureau	EA	FREE
PUB 56	In-Home Supportive Services General Information Brochure	REC	Adult Services Management Branch	EA	FREE
PUB 56 SP	IHSS General Information Brochure	REC	Adult Services Management Branch	EA	FREE
PUB 69	County Forms Catalog	REC	Administrative Services Bureau	EA	FREE
PUB 72	Community Care For Children. What Are Parents Responsibilities?	REC	Community Care Licensing Division	EA	FREE
PUB 72 SP	Community Care For Children. What Are Parents Responsibilities?'	REC	Community Care Licensing Division	EA	FREE
PUB 86 MULTILINGUAL	Everyone Is Different But Equal Under The Law Poster	REQ	Civil Rights Bureau	EA	FREE
PUB 99	Medi-Cal Information Document For California Children Placed In Out-Of-State Care	REC	Children's Services Program Development Bureau	MO	MASTER ONLY
PUB 104	In-Home Supportive Services Individual Provider Benefits And Services Information	REC	Adult Services Management Branch	EA	FREE
PUB 104 SP	In-Home Supportive Services Individual Provider Benefits And Services Information	REC	Adult Services Management Branch	EA	FREE
PUB 119	A Consumer Guide To Community Care Facilities	REC	Community Care Licensing Division	EA	FREE
PUB 122	Child Care Advocate Program	REQ	Community Care Licensing Division	EA	FREE
PUB 122 SP	Child Care Advocate Program	REQ	Community Care Licensing Division	EA	FREE
PUB 126	Confidentiality Of Adoption Records Independent Adoptions	REC	Adoptions Recruitment & Community Services Bureau	EA	FREE
PUB 129	Child Abuse Reporting And You - What Happens When A Report Is Made?	REC	Children Services Branch	EA	FREE
PUB 129 SP	Child Abuse Reporting- And You What Happens When A Report Is Made	REC	Children Services Branch	МО	FREE
PUB 132	Child Abuse Reporting Law	REQ	Children Services Branch	EA	FREE
PUB 141	Child Welfare Services Voluntary Family Maintenance	REC	Child Welfare Services Operations Bureau	EA	FREE
PUB 142	Child Welfare Services Court Ordered Family Maintenance	REQ	Child Welfare Services Operations Bureau	EA	FREE

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
PUB 143	Child Welfare Services Voluntary Family Reunification	REQ	Child Welfare Services Operations Bureau	EA	FREE
PUB 144	Child Welfare Services Court Ordered Family Reunification	REQ	Child Welfare Services Operations Bureau	EA	FREE
PUB 145	Child Welfare Services Permanent Placement For Youths Over 18 In School Or Training	REQ	Child Welfare Services Operations Bureau	EA	FREE
PUB 146	Child Welfare Services Court Ordered Permanent Placement	REQ	Child Welfare Services Operations Bureau	EA	FREE
PUB 147	Child Welfare Services Court Ordered Permanent Placement With Parent Visitation	REQ	Child Welfare Services Operations Bureau	EA	FREE
PUB 152	Adoption Assistance Program A Family - Every Special Child's Dream	REQ	Adoptions Recruitment & Community Services Bureau	EA	FREE
PUB 152 SP	Adoption Assistance Program A Family - Every Special Child's Dream	REQ	Adoptions Recruitment & Community Services Bureau	EA	FREE
PUB 170 ENG/SP	Did You Know?	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
PUB 187	Poster - Do You Know Someone Who Needs Help "Hearing"?	REQ	Office Of Deaf Access	МО	MASTER ONLY
PUB 190	How To Hire And Supervise Your In-Home Supportive Services (IHSS) Provider	REQ	Adult Services Management Bureau	EA	FREE
PUB 190 SP	How To Hire And Supervise Your In-Home Supportive Services (IHSS) Provider	REQ	Adult Services Management Bureau	EA	FREE
PUB 198	Adoption Every Waiting Child's Dream	REC	Adoptions Recruitment & Community Services Bureau	EA	FREE
PUB 199	Facts You Need To Know About Licenses For Child Day Care Facilities	REC	Community Care LicensingDivision	EA	FREE
PUB 200	Facts You Need To Know About Licenses for Community Care Facilities And Residential Care Facilities For The Elderly	REC	Community Care Licensing Division	EA	FREE
PUB 203	Your Guide To Workers' Compensation For IHSS Providers	REC	Adult Services Management Branch	EA	FREE
PUB 203 SP	Your Guide To Worker's Compensation For IHSS Providers	REC	Adult Services Management Branch	EA	FREE
PUB 206	Department of Social Services Injury And Illness Prevention Program	REQ	Administrative Services Bureau	EA	FREE
PUB 208	Are You Working?The At Risk Child Care Program May Be Able To Help You. Alternate Payment Program (Brochure)	REC	Child Care Programs	EA	FREE
PUB 208 SP	Are You Working? The At Risk Child Care Program May Be Able To Help You. Alternate Payment Program (Brochure)	REC	Child Care Programs	EA	FREE

AMOUNT PER ORDER UNIT REQ ORDER FORM TITLE PROGRAM only 100/50 SH per PD or BD unless NUMBER **RSP** CONTACT UNIT **REC** otherwise specified **PUB 209** We May Be Able To Help You Pay For Child Care. Alternate **REC** Child Care EΑ **FREE ENG/SP** Payment Program (Flyer) **Programs** Community Care Licensing Division **PUB 220** REC **FREE** California Directory of Resource Information EΑ Community Care **PUB 223 REQ** Information for Potential Group Home License Applicants EΑ **FREE** Licensing Division **PUB 235** 1 Hour Ways To Show You Care REC Office of Child **FREE** EΑ Abuse Prevention PUB 254 Foster Care REC **FREE** Foster Care Bookmark EΑ ENG/SP Policy Bureau **PUB 269** Child Car Seat Law-Poster **REQ** Community Care MO Master Only Licensing Division Child Car Seat Law-Poster **PUB 269 SP REQ** Community Care MO Master Only Licensing Division **PUB 270** Never Shake A Baby - Medical Brochure REC Office Of EΑ **FREE** Child Abuse Prevention **PUB 271** Never Shake A Baby - Public Brochure **REC** Office Of EΑ **FREE** Child Abuse Prevention Office Of REC **FREE PUB 271 SP** Never Shake A Baby - Public Brochure EΑ Child Abuse Prevention **PUB 273** Never Shake A Baby - Poster **REC** Office Of EΑ **FREE** Child Abuse Prevention Office Of **PUB 273 SP** Never Shake A Baby - Poster REC EΑ **FREE** Child Abuse Prevention REC CalWORKs **FREE PUB 275** Are You Interested In Free Family Planning Services? EΑ Eligibility Bureau **PUB 275 SP** Are You Interested In Free Family Planning Services? **REC CalWORKs** EΑ **FREE** Eligibility Bureau **PUB 282** Maximum Family Grant/Family Planning (MFG/FP) REC CalWORKs EΑ **FREE** Eligibility Bureau Community Care Licensing Division PD **PUB 299** Sudden Infant Death Syndrome REC **FREE PUB 300** Reduce The Risk of Sudden Infant Death Syndrome **REC** Community Care EΑ **FREE** Licensing Division Community Care Licensing Division **PUB 317** Licensed To Care Brochure REC EΑ **FREE** Community Care Licensing Division **PUB 318** Licensed To Care Poster **REC** EΑ **FREE** REC **PUB 325** Your Right To Make Decisions Abut Medical Treatment Communtiy Care EΑ **FREE** Licensing Division **PUB 328** Trustline Brochure: Registering Caregiver Information REC Community Care EΑ FREE Licensing Division **PUB 328 SP** Trustline Brochure: Registering Caregiver Information REC Community Care EΑ **FREE** Licensing Division **PUB 331** Innovations In Child Care REC Community Care EΑ **FREE** Licensing Division

REC= RECOMMENDED

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
PUB 339	Ombudsman For Foster Care Brochure	REC	Office Of Ombudsman	EA	FREE
PUB 349	Open Your Heart Become A Foster Parent - Poster	REC	Foster Care Policy Bureau	EA	FREE
PUB 350	Open Your Heart Become A Foster Parent - Poster	REC	Foster Care Policy Bureau	EA	FREE
PUB 352	There Are Children Waiting For Foster Homes	REC	Foster Care Policy Bureau	EA	FREE
PUB 352 SP	There Are Children Waiting For Foster Homes	REC	Foster Care Policy Bureau	EA	FREE
PUB 367	Reach For Your Dreams	REC	Teen Programs	EA	FREE
PUB 372	Kinship Guardianship Assistance Payment Program	REQ	Foster Care Policy Bureau	EA	FREE
PUB 376	The Options For Recovery/Will You Take Care of Me?	REC	Foster Care Policy Bureau	EA	FREE
PUB 377	Will You Take Care Of Me?	REC	Foster Care Policy Bureau	EA	FREE
PUB 378	Who Will Take Care Of Me? You?	REC	Foster Care Policy Bureau	EA	FREE
QC 10	Monthly Quality Control Caseload Statistics Report	REC	Review and Evaluation Bureau	МО	MASTER ONLY
QC 11	Department Of Social Services Individual Equipment Assignment - REB District Office	REC	Review and Evaluation Bureau	МО	MASTER ONLY
RCA 43	RCA Notice Of A Participation Problem	REQ	Refugee & Immigration Program Bureau	МО	MASTER ONLY
RCA 44	RCA Notice of no Good Cause Determination And Conciliation Appointment	REQ	Refugee & Immigration Program Bureau	МО	MASTER ONLY
RS 1	Refugee Resettlement Program Services Application And Assessment Information	RSP	Refugee & Immigration Program Bureau	МО	MASTER ONLY
RS 1C	Refugee Resettlement Program Services Application And Assessment	RSP	Refugee & Immigration Program Bureau	МО	MASTER ONLY
RS 3	Central Intake Unit (CIU) Referral/Notification Form	REQ	Refugee & Immigration Program Bureau	МО	MASTER ONLY
RS 3A	Client Tracking	RSP	Refugee & Immigration Program Bureau	МО	MASTER ONLY
RS 3B	Central Intake Unit/Central Intake Point Nonparticipation Interview Appointment Letter	RSP	Refugee & Immigration Program Bureau	SE	FREE
RS 3C	Nonparticipation Interview Report	RSP	Refugee & Immigration Program Bureau	МО	MASTER ONLY
RS 8A	90 Day Follow-Up	RSP	Refugee & Immigration Program Bureau	PD	50 SH FREE

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
RS 9A	Health Accessing Referral	RSP	Refugee & Immigration Program Bureau	PD	100 SH FREE
RS 10	Refugee Resettlement Program Quarterly Report On Assessments And Select Demographics	REQ	Refugee & Immigration Program Bureau	МО	MASTER ONLY
RS 14	Targeted Assistance Program Intake/Assessment And Referral Monthly Report	RSP	Refugee & Immigration Program Bureau	SE	FREE
RS 15	Refugee Monthly Employment Social Services Report	REQ	Refugee & Immigration Program Bureau	МО	MASTER ONLY
RS 16 RRP	Refugee Resettlement Program Monthly Grant Reductions, Terminations And Sanctions	REQ	Refugee & Immigration Program Bureau	МО	MASTER ONLY
RS 16TA	Refugee Resettlement Program Monthly Grant Reduction, Terminations and Sanctions - Targeted Assistance	REQ	Refugee & Immigration Program Bureau	MO	MASTER ONLY
RS 18	Refugee Services - Information Transmittal	REQ	Refugee & Immigration Program Bureau	SE	.09 SE
RS 22A	Refugee Program Report Time-Expired Cased and GA/GR Refugee Cases And Persons	REQ	Refugee & Immigration Program Bureau	EA	FREE
RS 30	Explanation Of The Mandatory Work Registration Requirements	RSP	Refugee & Immigration Program Bureau	PD	100 SH FREE
RS 237	Refugee Resettlement Program - Cash Grant Only)	REQ	Refugee & Immigration Program Bureau	МО	MASTER ONLY
RS 238	Refugee Assistance By Nationality Annual Report - (Persons	REQ	Refugee & Immigration Program Bureau	МО	MASTER ONLY
RS 249	Refugee Cash Assistance (RCA) Conciliation Report	REQ	Refugee & Immigration Program Bureau	МО	MASTER ONLY
SAWS 1	Conversheet to the Application For Cash Aid, Food Stamps and/or Medi-Cal/State-run County medical Services Program (CMSP)	RSP	CalWORKs Eligibility Bureau	SE	.05 SE
SAWS 1 SP	Conversheet to the Application For Cash Aid, Food Stamps and/or Medi-Cal/State-run County medical Services Program (CMSP	REQ	CalWORKs Eligibility Bureau	SE	.08 SE
SAWS 2	Statement Of Facts Cash Aid, Food Stamps And Medical Assistance	REQ	CalWORKs Eligibility Bureau	SE	.11 SE
SAWS 2 SP	Statement of Facts - Cash Aid, Food Stamps & Medi-Cal Assistance	REQ	CalWORKs Eligibility Bureau	SE	.12 SE
SAWS 2A	Important Information For Cash Aid, Food Stamps, And Medical Assistance Applicants And Recipients	REQ	CalWORKs Eligibility Bureau	SE	.07 SE
SAWS 2A SP	Important Information For Cash Aid, Food Stamps, Medical Assistance Applicants And Recipients	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
SAWS 7	Monthly Eligibility/Status Report	REQ	CalWORKs Eligibility Bureau	PD	100 SH 3.27 PD
SAWS 7 SP	Monthly Eligibility/Status Report	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY

AMOUNT PER ORDER UNIT ORDER TITLE REQ PROGRAM FORM only 100/50 SH per PD or BD unless NUMBER **RSP** CONTACT UNIT **REC** otherwise specified SC 800 **REQ** MASTER ONLY Summary Report Of Special Circumstances Fiscal Policy MO Bureau Registration Fee Worksheet For 75th Percentile Regional Market Rate (RMR) Ceiling Level SCC 12 **REC** Child Care MO MASTER ONLY Programs Bureau **SOC 154** Agency - Group Home Agreement Child Placed By Agency In **REQ Adult Services** PD 100 SH Group Home Management 4.28 PD Branch **SOC 154 SP** Agency - Group Home Agreement Child Placed By Agency In **REQ Adult Services** MO MASTER ONLY Management Branch Voluntary Placement Agreement - Parent/Agency Adult Services SOC 155 **REQ** EΑ .09 EA Management Branch **SOC 155 SP** Voluntary Placement Agreement - Parent/Agency **REQ** Adult Services PD 50 SH Management 1.62PD Branch REQ **Adult Services** PD 50 SH **SOC 155B** Mutual Agreement For 18 Year Olds 1.04 PD Management Branch **SOC 155C** Voluntary Placement Agreement - Parent/Agency (Indian Child) **REQ Adult Services** SE .17 SE Management Branch **SOC 156** Agency - Foster Parents Agreement Child Placed By Agency In **REQ** Adult Services PD 50 SH Management 2.20 PD Foster Home Branch MASTER ONLY **SOC 156 SP** Agency - Foster Parents Agreement Child Placed By Agency **REQ Adult Services** MO In Foster Home Management Branch **SOC 158** Foster Child's Data Record And AFDC-FC Certification **REQ** Data Analysis BX/SE **FREE** And Publications Branch **SOC 158A REQ** Data Analysis SE Foster Child's Data Record And AFDC-FC Certification .08 SE And Publications Branch Data Analysis **SOC 158B** Foster Child's History Record REQ SE .12 SE And Publications Branch **SOC 158C** Foster Child's Data Record Batch Transmittal **RSP** Data Analysis SE .08 SE And Publications Branch RSP **SOC 159** Face Sheet **Adult Services** PD 100 SH Management 3.54 PD Branch SOC 242 County Services Block Grant Programs Monthly Statistical Report **REQ Adult Services** EΑ **FREE** Management Branch SOC 291 Preplacement Preventive Services **REQ** Data Analysis EΑ **FREE** And Publications Branch **REQ Adult Services** PD SOC 293A In-Home Supportive Services Needs Assessment-Face Sheet 50 SH Management .73 PD Branch

REC= RECOMMENDED

IHSS Income Eligibility-Adult	FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
SOC 295 Application For Social Services RSP Adult Services Management Branch SOC 295 SP Application For Social Services RSP Adult Services Management Stranch SOC 310 Statement Of Facts For In-Home Supportive Services REQ Adult Services Management Branch SOC 310 SP Statement Of Facts For In-Home Supportive Services REQ Adult Services Management Branch SOC 310 SP In-Home Supportive Services Special Pre-Authorized Transaction REC Adult Services Management Branch SOC 312 In-Home Supportive Services Special Pre-Authorized Transaction REC Adult Services Management Branch SOC 317 In-Home Supportive Services Batch Cover Sheet REC Adult Services Management Branch SOC 318 Request For Confirmation Of Child's Status As Indian SOC 319 Notice Of Involuntary Child Custody Proceeding Involving An Indian Child SOC 321 Request For Order And Consent - Paramedical Services SOC 321 Request For Order And Consent - Paramedical Services Soc 332 In-Home Supportive Services Overpayment Collection Transaction SOC 332 In-Home Supportive Services Recipient/Employee Responsibility Checklist SOC 332 In-Home Supportive Services Recipient/Employee Responsibility Checklist SOC 340 Elder Abuse/Dependent Adult Abuse Monthly Statistical Report REQ Child Welfare Services Bureau SOC 341 Report Of Suspected Dependent Adult/Elder Abuse Management Branch SOC 343 Investigation Of Suspected Dependent Adult/Elder Abuse Management Branch SOC 343 Investigation Of Suspected Dependent Adult/Elder Abuse Management Branch Branch Branch SOC 352 Section A - County Plan Summary REQ Adult Services Management Branch Branch	94A	IHSS Income Eligibility-Adult	REC	Management	PD	100 SH 2.88 PD
SOC 295 SP Application For Social Services RSP Adult Services Management Branch SOC 310 Statement Of Facts For In-Home Supportive Services REQ Adult Services Management Branch SOC 310 SP Statement Of Facts For In-Home Supportive Services REQ Adult Services Management Branch SOC 310 SP Statement Of Facts For In-Home Supportive Services REQ Adult Services Management Branch SOC 312 In-Home Supportive Services Special Pre-Authorized Transaction REC Adult Services Management Branch SOC 317 In-Home Supportive Services Batch Cover Sheet REC Adult Services Management Branch SOC 318 Request For Confirmation Of Child's Status As Indian SOC 319 Notice of Involuntary Child Custody Proceeding Involving An Indian Child Indian Child SOC 321 Request For Order And Consent - Paramedical Services SOC 330 In-Home Supportive Services Overpayment Collection Transaction SOC 330 In-Home Supportive Services Recipient/Employee Responsibility REQ Child Welfare Services Bureau SOC 332 In-Home Supportive Services Recipient/Employee Responsibility REQ Child Welfare Services Bureau SOC 332 In-Home Supportive Services Recipient/Employee Responsibility REQ Child Welfare Services Bureau SOC 332 In-Home Supportive Services Recipient/Employee Responsibility REQ Child Welfare Services Bureau SOC 332 In-Home Supportive Services Recipient/Employee Responsibility REQ Child Welfare Services Bureau SOC 340 Elder Abuse/Dependent Adult Abuse Monthly Statistical Report SOC 341 Report Of Suspected Dependent Adult/Elder Abuse Management Branch SOC 343 Investigation Of Suspected Dependent Adult/Elder Abuse Management Branch SOC 345 Section A - County Plan Summary REQ Adult Services Management Branch Branch	OC 294C	IHSS Income Eligibility - Child	REC	Management	PD	50 SH 2.52 PD
SOC 310 Statement Of Facts For In-Home Supportive Services REQ Adult Services Management Branch SOC 310 SP Statement Of Facts For In-Home Supportive Services REQ Adult Services Management Branch SOC 310 SP Statement Of Facts For In-Home Supportive Services REQ Adult Services Management Branch SOC 312 In-Home Supportive Services Special Pre-Authorized Transaction REC Adult Services Management Branch SOC 317 In-Home Supportive Services Batch Cover Sheet REC Adult Services Management Branch SOC 318 Request For Confirmation Of Child's Status As Indian REQ Child Welfare Services Bureau SOC 319 Notice Of Involuntary Child Custody Proceeding Involving An Indian Child Request For Order And Consent - Paramedical Services RSP Adult Services Bureau SOC 321 Request For Order And Consent - Paramedical Services RSP Adult Services Management Bureau SOC 330 In-Home Supportive Services Overpayment Collection Transaction REQ Child Welfare Services Bureau SOC 332 In-Home Supportive Services Recipient/Employee Responsibility REQ Child Welfare Services Bureau SOC 332 SP In-Home Supportive Services Recipient/Employer Responsibility REQ Child Welfare Services Bureau SOC 340 Elder Abuse/Dependent Adult Abuse Monthly Statistical Report RSP Adult Services Management Branch SOC 341 Report Of Suspected Dependent Adult/Elder Abuse REQ Adult Services Management Branch SOC 343 Investigation Of Suspected Dependent Adult/Elder Abuse Adult Services Management Branch SOC 343 Section A - County Plan Summary REQ Adult Services Adults Services Management Branch	OC 295	Application For Social Services	RSP	Management	SE	.04 SE
SOC 310 SP Statement Of Facts For In-Home Supportive Services REQ Adult Services Management Branch SOC 312 In-Home Supportive Services Special Pre-Authorized Transaction SOC 313 In-Home Supportive Services Batch Cover Sheet REC Adult Services Management Branch SOC 317 In-Home Supportive Services Batch Cover Sheet REC Adult Services Management Branch SOC 318 Request For Confirmation Of Child's Status As Indian SOC 319 Notice Of Involuntary Child Custody Proceeding Involving An Indian Child SOC 321 Request For Order And Consent - Paramedical Services Services Bureau SOC 330 In-Home Supportive Services Overpayment Collection Transaction SOC 332 In-Home Supportive Services Recipient/Employee Responsibility Checklist SOC 332 In-Home Supportive Services Recipient/Employer Responsibility REQ Child Welfare Services Bureau SOC 332 SOC 334 In-Home Supportive Services Recipient/Employer Responsibility REQ Child Welfare Services Bureau SOC 340 Elder Abuse/Dependent Adult Abuse Monthly Statistical Report REP Adult Services Management Branch SOC 341 Report Of Suspected Dependent Adult/Elder Abuse REQ Adult Services Management Branch SOC 343 Investigation Of Suspected Dependent Adult/Elder Abuse REQ Adult Services Management Branch REQ Adult Services	OC 295 SP	Application For Social Services	RSP	Management	SE	.11 SE
SOC 312 In-Home Supportive Services Special Pre-Authorized Transaction REC Adult Services Management Branch SOC 317 In-Home Supportive Services Batch Cover Sheet REC Adult Services Management Branch SOC 318 Request For Confirmation Of Child's Status As Indian REQ Child Welfare Services Bureau SOC 319 Notice Of Involuntary Child Custody Proceeding Involving An Indian Child Indian Child Request For Order And Consent - Paramedical Services SOC 321 Request For Order And Consent - Paramedical Services RSP Adult Services Management Bureau SOC 330 In-Home Supportive Services Overpayment Collection Transaction REQ Child Welfare Services Bureau SOC 332 In-Home Supportive Services Recipient/Employee Responsibility REQ Child Welfare Services Bureau SOC 332 In-Home Supportive Services Recipient/Employer Responsibility REQ Child Welfare Services Bureau SOC 332 In-Home Supportive Services Recipient/Employer Responsibility REQ Child Welfare Services Bureau SOC 340 Elder Abuse/Dependent Adult Abuse Monthly Statistical Report RSP Adult Services Management Branch SOC 341 Report Of Suspected Dependent Adult/Elder Abuse REQ Adult Services Management Branch SOC 343 Investigation Of Suspected Dependent Adult/Elder Abuse REQ Adult Services Management Branch SOC 352 Section A - County Plan Summary REQ Adult Services Management Branch	OC 310	Statement Of Facts For In-Home Supportive Services	REQ	Management	SE	.07 SE
SOC 317 In-Home Supportive Services Batch Cover Sheet REC Adult Services Management Branch SOC 318 Request For Confirmation Of Child's Status As Indian REQ Child Welfare Services Bureau SOC 319 Notice Of Involuntary Child Custody Proceeding Involving An Indian Child Request For Order And Consent - Paramedical Services Responsibility Report Services Bureau SOC 321 Request For Order And Consent - Paramedical Services Responsibility Recompany Reportive Services Overpayment Collection Transaction Recompany Recompan	OC 310 SP	Statement Of Facts For In-Home Supportive Services	REQ	Management	SE	.13 SE
SOC 318 Request For Confirmation Of Child's Status As Indian REQ Child Welfare Services Bureau SOC 319 Notice Of Involuntary Child Custody Proceeding Involving An Indian Child REQ Child Welfare Services Bureau SOC 321 Request For Order And Consent - Paramedical Services RSP Adult Services Management Bureau SOC 330 In-Home Supportive Services Overpayment Collection Transaction REQ Child Welfare Services Bureau SOC 332 In-Home Supportive Services Recipient/Employee Responsibility Checklist Child Welfare Services Bureau SOC 332 In-Home Supportive Services Recipient/Employee Responsibility Checklist REQ Child Welfare Services Bureau SOC 332 SP In-Home Supportive Services Recipient/Employer Responsibility Checklist REQ Child Welfare Services Bureau SOC 340 Elder Abuse/Dependent Adult Abuse Monthly Statistical Report RSP Adult Services Management Branch SOC 341 Report Of Suspected Dependent Adult/Elder Abuse REQ Adult Services Management Branch SOC 343 Investigation Of Suspected Dependent Adult/Elder Abuse REQ Adult Services Management Branch SOC 352 Section A - County Plan Summary REQ Adult Services Management Branch	OC 312	In-Home Supportive Services Special Pre-Authorized Transaction	REC	Management	PD	100 SH 2.07 PD
SOC 319 Notice Of Involuntary Child Custody Proceeding Involving An Indian Child Request For Order And Consent - Paramedical Services Responsibility Child Welfare Services Bureau Soc 321 In-Home Supportive Services Overpayment Collection Transaction REQ Child Welfare Services Bureau Soc 332 In-Home Supportive Services Recipient/Employee Responsibility REQ Child Welfare Services Bureau Soc 332 Pin-Home Supportive Services Recipient/Employer Responsibility REQ Child Welfare Services Bureau Soc 332 SP In-Home Supportive Services Recipient/Employer Responsibility REQ Child Welfare Services Bureau Soc 340 Elder Abuse/Dependent Adult Abuse Monthly Statistical Report RSP Adult Services Management Branch Soc 341 Report Of Suspected Dependent Adult/Elder Abuse REQ Adult Services Management Branch Soc 343 Investigation Of Suspected Dependent Adult/Elder Abuse REQ Adult Services Management Branch Soc 352 Section A - County Plan Summary REQ Adult Services Management Branch	OC 317	In-Home Supportive Services Batch Cover Sheet	REC	Management	PD	100 SH 2.33 PD
Indian Child Services Bureau	OC 318	Request For Confirmation Of Child's Status As Indian	REQ		EA	.05 EA
SOC 330 In-Home Supportive Services Overpayment Collection Transaction REQ Child Welfare Services Bureau SOC 332 In-Home Supportive Services Recipient/Employee Responsibility Checklist REQ Child Welfare Services Bureau SOC 332 SP In-Home Supportive Services Recipient/Employer Responsibility REQ Child Welfare Services Bureau SOC 340 Elder Abuse/Dependent Adult Abuse Monthly Statistical Report RSP Adult Services Management Branch SOC 341 Report Of Suspected Dependent Adult/Elder Abuse REQ Adult Services Management Branch SOC 343 Investigation Of Suspected Dependent Adult/Elder Abuse REQ Adult Services Management Branch SOC 352 Section A - County Plan Summary REQ Adult Services Management Branch	OC 319		REQ		PD	50 SH 4.38 PD
SOC 332 In-Home Supportive Services Recipient/Employee Responsibility Checklist SOC 332 SP In-Home Supportive Services Recipient/Employer Responsibility Checklist REQ Child Welfare Services Bureau REQ Child Welfare Services Bureau REQ Child Welfare Services Bureau SOC 340 Elder Abuse/Dependent Adult Abuse Monthly Statistical Report RSP Adult Services Management Branch SOC 341 Report Of Suspected Dependent Adult/Elder Abuse REQ Adult Services Management Branch SOC 343 Investigation Of Suspected Dependent Adult/Elder Abuse REQ Adult Services Management Branch SOC 352 Section A - County Plan Summary REQ Adult Services Management Branch	OC 321	Request For Order And Consent - Paramedical Services	RSP	Management	EA	.05 EA
SOC 332 SP In-Home Supportive Services Recipient/Employer Responsibility Checklist REQ Child Welfare Services Bureau SOC 340 Elder Abuse/Dependent Adult Abuse Monthly Statistical Report RSP Adult Services Management Branch SOC 341 Report Of Suspected Dependent Adult/Elder Abuse REQ Adult Services Management Branch SOC 343 Investigation Of Suspected Dependent Adult/Elder Abuse REQ Adult Services Management Branch SOC 352 Section A - County Plan Summary REQ Adult Services Management Branch	OC 330	In-Home Supportive Services Overpayment Collection Transaction	REQ		PD	100 SH 3.03 PD
SOC 340 Elder Abuse/Dependent Adult Abuse Monthly Statistical Report RSP Adult Services Management Branch SOC 341 Report Of Suspected Dependent Adult/Elder Abuse REQ Adult Services Management Branch SOC 343 Investigation Of Suspected Dependent Adult/Elder Abuse REQ Adult Services Management Branch SOC 343 Soc 343 REQ Adult Services Management Branch REQ Adult Services Management Branch SOC 352 Section A - County Plan Summary REQ Adult Services Management Branch	OC 332		REQ		МО	MASTER ONLY
SOC 341 Report Of Suspected Dependent Adult/Elder Abuse REQ Adult Services Management Branch SOC 343 Investigation Of Suspected Dependent Adult/Elder Abuse REQ Adult Services Management Branch SOC 352 Section A - County Plan Summary REQ Adult Services Management Branch	OC 332 SP		REQ		МО	MASTER ONLY
SOC 343 Investigation Of Suspected Dependent Adult/Elder Abuse REQ Adult Services Management Branch SOC 352 Section A - County Plan Summary REQ Adult Services Management Branch REQ Adult Services Management Branch	OC 340	Elder Abuse/Dependent Adult Abuse Monthly Statistical Report	RSP	Management	EA	FREE
SOC 352 Section A - County Plan Summary REQ Adult Services Management Branch	OC 341	Report Of Suspected Dependent Adult/Elder Abuse	REQ	Management	SE	FREE
Management Branch	OC 343	Investigation Of Suspected Dependent Adult/Elder Abuse	REQ	Management	SE	FREE
	OC 352	Section A - County Plan Summary	REQ	Management	МО	MASTER ONLY
SOC 352A Program Reduction Detail By Delivery Mode REQ Adult Services Management Branch	OC 352A	Program Reduction Detail By Delivery Mode	REQ	Management	MO	MASTER ONLY

REC= RECOMMENDED

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
SOC 352B	Program Reduction Forecast	REQ	Adult Services Management Branch	МО	MASTER ONLY
SOC 352C	Forecast Detail And Narrative	REQ	Adult Services Management Branch	МО	MASTER ONLY
SOC 352D	Section C1. FY Forecast Summary	REQ	Adult Services Management Branch	МО	MASTER ONLY
SOC 352E	Section B Record Of FY 1981/82 Expenditures	REQ	Adult Services Management Branch	МО	MASTER ONLY
SOC 361	Statement Of Earnings And Deductions	REQ	Adult Services Management Branch	МО	MASTER ONLY
SOC 367	1986 CWS Case Review - Emergency Response	REQ	Children's Services Operations Bureau		MASTER ONLY
SOC 368	1986 Child Welfare Services (CWS) Case Review Family Maintenance (FM) Program Log	REQ	Children's Services Operations Bureau		MASTER ONLY
SOC 369	Agency-Relative Foster Parent Financial Disclosure	REQ	Family & Children Services Policy Bureau	МО	MASTER ONLY
SOC 369 SP	Agency-Relative Foster Parent Financial Disclosure	REQ	Family & Children Services Policy Bureau	МО	MASTER ONLY
SOC 383	Child Welfare Services Application	REQ	Child Welfare Services Bureau	МО	MASTER ONLY
SOC 383 SP	Child Welfare Services Application	REQ	Child Welfare Services Bureau	MO	MASTER ONLY
SOC 385	Independent Living Skills Program Individual Client Characteristics Data	REQ	Child Welfare Services Bureau	МО	MASTER ONLY
SOC 387	Child Protective Services Alert	REQ	Child Welfare Services Bureau	МО	MASTER ONLY
SOC 390	Form Letter - Unprocessed Invoice	REQ	Children Services Branch	МО	MASTER ONLY
SOC 393	SDSS Adult Services Activity Questionnaire	REC	Adult Services Management Branch	МО	MASTER ONLY
SOC 404	In-Home Supportive Services Program Direct Deposit Enrollment/Change/Cancellation Form	REC	Adult Services Management Branch	SE	FREE
SOC 404 SP	In-Home Supportive Services Program Direct Deposit Enrollment/Change/Cancellation Form	REC	Adult Services Management Branch	SE	FREE
SOC 405	(ILP) Report of Individual Youths Served	REQ	Adult Services Management Branch	МО	MASTER ONLY
SOC 405A	Independent Living Program (ILP)	REQ	Adult Services Management Branch	МО	MASTER ONLY
SOC 409 ENG/SP	IHSS/CMIPS Elective State Disability Insurance (SDI) Form	REC	Adult Services Management Branch	МО	MASTER ONLY

REC= RECOMMENDED FORM

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FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
SOC 412	In-Home Supportive Services (IHSS) Employee's Claim for Workers Compensation Benefits Notice of Potential Eligibility For Benefits	REQ	Adult Services Management Branch	SE	FREE
SOC 412 SP	In-Home Supportive Services (IHSS) Employee's Claim for Workers Compensation Benefits Notice of Potential Eligibility For Benefits	REQ	Adult Services Management Branch	SE	FREE
SOC 413 ENG/SP	Notice to Employees DSS/IHSS State Compensation Fund Insurer (Bilingual)	REC	Adult Services Management Branch	EA	FREE
SOC 422	Family Preservation Services Case Information Assistance - Foster Care	RSP	Adult Services Management Branch	МО	MASTER ONLY
SOC 423	Emergency Response Protocol	RSP	Adult Services Management Branch	МО	MASTER ONLY
SOC 425	Physician's Certification of Medical Necessity	REQ	Adult Services Management Branch	PD	50 SH 2.11 PD
SOC 426	Personal Care Program Provider Enrollment Agreement	REQ	Adult Services Management Branch	SE	.07 SE
SOC 426 SP	Personal Care Program Provider/Enrollment Agreement	REQ	Adult Services Management Branch	SE	.18 SE
SOC 427	Nurse Review	REQ	Adult Services Management Branch	МО	MASTER ONLY
SOC 428	IHSS Personal Care Program Eligibility	REQ	Adult Services Management Branch	МО	MASTER ONLY
SOC 431	Personal Care Program Contract Agency Certification	REC	Adult Services Management Branch	МО	MASTER ONLY
SOC 432	Claim For Reimbursement In-Home Supportive Services Program Contract Expenditures	REQ	Adult Programs Branch	МО	MASTER ONLY
SOC 432A	Claim For Reimbursement: IHSS Program Y2K Emergency Payments - IP Mode Only	REQ	Adult Programs Branch	МО	MASTER ONLY
SOC 433	Emergency Assistance Application (Title IV-A)	REQ	Adult Services Management Branch	МО	MASTER ONLY
SOC 434	Request For Verification Of Emergency Assistance Eligibility	REC	Adult Services Management Branch	МО	MASTER ONLY
SOC 435 ENG/SP	PCSP Provider Enrollment Notice	REC	Adult Services Management Branch	МО	MASTER ONLY
SOC 436 ENG/SP	PCSP Recipient Non-Compliance Notice	REC	Adult Services Management Branch	МО	MASTER ONLY
SOC 437 ENG/SP	PCSP Provider Enrollment Recipient Notice	REC	Adult Services Management Branch	МО	MASTER ONLY

AMOUNT PER ORDER UNIT **ORDER FORM** TITLE **REQ PROGRAM** only 100/50 SH per PD or BD unless otherwise specified **NUMBER RSP** CONTACT UNIT **REC** SOC 443 Homemaker Services Time Report **REC Adult Services** MO MASTER ONLY Management Branch **Adult Services** SOC 444 IHSS Contract Procurement Process Certification **REC** MO MASTER ONLY Management Branch SOC 445 Medi-Cal Recovery for the Personal Care Services Program **REQ Adult Services** EΑ **FREE** Management Branch REQ **Adult Services SOC 445 SP** Medi-Cal Recovery for the Personal Care Services Program EΑ **FREE** Management Branch In-Home Supportive Services Program Public Authority/ REQ **Adult Services** FREE SOC 448 FΑ Management Nonprofit Consortium Invoice Administrative Costs Branch SOC 450 Voluntary Services Certificate REQ **Adult Services** .04 EA FΑ Management Branch **Adult Services** SOC 451 **REQ** Cash Assistance Program For Immigrants; Supplemental EΑ .15 EA Application Management Branch **SOC 451 SP** Cash Assistance Program For Immigrants; Supplemental REQ **Adult Services** FΑ .15 EA Management Application Branch SOC 452 Cash Assistance Program For Immigrants; (CAPI) **REQ Adult Services** EΑ .09 EA Income Eligibility Management Branch REQ Adult Services SOC 453 Living Arrangement & Housheold Expenses .09 FA FA Management Branch **SOC 453 SP** Living Arrangement & Housheold Expenses **REQ Adult Services** EΑ .09 EA Management Branch SOC 454 Cash Assistance Program For Immigrants Sponsor **REQ Adult Services** EΑ .09 EA To Alien Deeming Worksheet Management Branch SOC 455 Cash Assistance Program For Immigrants State Interim REQ **Adult Services** MO MASTER ONLY Assistance Reimbursement Authorization Management Branch REQ **Adult Services SOC 455 SP** Cash Assistance Program For Immigrants State Interim MO MASTER ONLY Assistance Reimbursement Authorization Management Branch Fiscal Policy **SOC 800** Summary Report Of Assistance Expenditures Emergency **REQ** MO MASTER ONLY Bureau Summary Report Of Assistance Expenditures Emergency Assistance-Unemployed Parent Fiscal Policy MASTER ONLY **SOC 801 REQ** MO Bureau **SOC 807** Cash Assistance Program For Immigrants (CAPI) Request REC Fiscal Policy MO MASTER ONLY For Waiver Of Overpayment Recovery - Income/Expenses Bureau Cash Assistance Program For Immigrants (CAPI) Request REC Fiscal Policy **SOC 807 SP** MO MASTER ONLY For Waiver Of Overpayment Recovery - Income/Expenses Bureau Cash Assistance Program For Immigrants (CAPI) Request For Waiver Of Overpayment Recovery - Without Fault **SOC 807A REC** Fiscal Policy MO MASTER ONLY Bureau SOC 807A SP Cash Assistance Program For Immigrants (CAPI) Request **REC** Fiscal Policy MO MASTER ONLY For Waiver Of Overpayment Recovery - Without Fault Bureau

REC= RECOMMENDED

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FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
SOC 808	Quarterly Report Of Overpayments And Collections For Cash Assistance Program For Immigrants (CAPI)	REQ	Data Systems & Survey Design Bureau	МО	MASTER ONLY
SSP 4A	Application And Verification For Special Circumstances Allowance (EAS 46-425)	RSP	Adult Services Management Bureau	SE	.07 SE
SSP 4B	Notice Of Intended Action And Right To Request A State Hearing On Your Application For A Special Circumstances Allowance	REQ	Adult Services Management Bureau	SE	.13 SE
SSP 14	Authorization For Reimbursement Of Interim Assistance Granted Pending SSI/SSP Eligibility Determination	RSP	Adult Services Management Branch	SE	.14 SE
SSP 14 SP	Authorization For Reimbursement Of Interim Assistance Granted Pending SSI/SSP Eligibility Determination	RSP	Adult Services Management Branch	МО	MASTER ONLY
SSP 17	Notice Of Action And Right To Request A State Hearing On Interim Assistance	RSP	Adult Services Management Branch	SE	.23 SE
SSP 17 SP	Notice Of Action And Right To Request A State Hearing On Interim Assistance	RSP	Adult Services Management Branch	МО	MASTER ONLY
STAT 16	Request For Correction Of Statistical Reports	RSP	Data Analysis And Publications Branch	МО	MASTER ONLY
STD 435	Request for Duplicate Controller's Warrant/Stop Payment	REQ	Assistant Chief Counsel	SE	FREE
STD 850	Fire Safety Inspection Request	REQ	Community Care Licensing Program Development Bureau	EA	FREE
STO CA 0034	Forged Endorsement Affidavit	REQ	Community Care Licensing Division		50 SH FREE
TEMP 1701	Services Provision To Homeless Families With Children	REC	Children's Services Branch	МО	MASTER ONLY
TEMP 1711	Child Abuse Challenge Grant Report Of Expenditures/ Encumbrances Part I	REC	Children's Services Branch	МО	MASTER ONLY
TEMP 1712	Child Abuse Challenge Grant Report Of Expenditures/ Encumbrances Part II	REC	Children's Services Branch	МО	MASTER ONLY
TEMP 1721	Food Stamp Program UAW/UMWA Strikers Provision Report	REQ	Fraud Prevention Bureau	МО	MASTER ONLY
TEMP 1722	AFDC/FS Intercept Program	REQ	Fraud Prevention Bureau	МО	MASTER ONLY
TEMP 1722A	Food Stamp Intercept System Transmittal	REQ	Fraud Prevention Bureau	МО	MASTER ONLY
TEMP 1722B ENG/SP	Food Stamp Intercept System - Input Document	REQ	Fraud Prevention Bureau	МО	MASTER ONLY
TEMP 1722C	Limited Assignment Of Delinquent Restitution	REQ	Fraud Prevention Bureau	МО	MASTER ONLY
TEMP 1722D	Interagency Offset Program - Modification Request(s)	REQ	Fraud Prevention Bureau	МО	MASTER ONLY

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FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
TEMP 1750	(AFDC) Immediate Need Monthly Statistical Report	RSP	Data Analysis And Publications Branch	МО	MASTER ONLY
TEMP 1763	Collection Of Child Support Information During Quality Control Review	RSP	REB Policy Administrative Support Unit	МО	MASTER ONLY
TEMP 1774 ENG/SP	State Disability Insurance	REC	Adult Services Management Branch	МО	MASTER ONLY
TEMP 2045	Application Processing Corrective Action Plan Steffens v. McMahon	REQ	Food Stamp Program Bureau	МО	MASTER ONLY
TEMP 2073	Important Information - Information Practices Act of 1977	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
TEMP 2073 SP	Important Information - Information Practices Act of 1977	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
TEMP 2074 MULTILINGUAL	Important Notice To All Food Stamp Recipients	REC	Employment Operation Section	МО	MASTER ONLY
TEMP 2075 MULTILINGUAL	Important Notice To All Food Stamp Recipients	REC	Employment Operation Section	МО	MASTER ONLY
TEMP 2096 MULTILINGUAL	Self-employment Income - AFDC & FS Recipients	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
TEMP 2098	Notice To Custodial Parents Who Have Received Title IV-D Support Enforcement Services	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
TEMP 2098 SP	Notice To Custodial Parents Who Have Received Title IV-D Support Enforcement Services	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
TEMP 2104 ENG/SP	New Rules For Homeless Assistance For Persons Eligible For Cash Aid	REQ	CalWORKs Eligiblity Bureau	МО	MASTER ONLY
TEMP 2117 MULTILINGUAL	We May Owe You Food Stamps	RSP	Food Stamp Bureau	МО	MASTER ONLY
TEMP 2118 MULTILINGUAL	We May Owe You Food Stamps (Student/Training Program Eligibility)	RSP	Food Stamp Bureau	EA	FREE
TEMP 2120	Welfare To Work Referral	REC	Employment Program Bureau	МО	MASTER ONLY
TEMP 2120 SP	Welfare To Work Referral	REC	Employment Program Bureau	МО	MASTER ONLY
TEMP 2125	New Cash Aid Rule For Pregnant Or Parenting Minors	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
TEMP 2131	Addendum To Food Stamp Application	RSP	Food Stamp Bureau	МО	MASTER ONLY
TEMP 2131 SP	Addendum To Food Stamp Application	RSP	Food Stamp Bureau	МО	MASTER ONLY
TEMP 2132	Food Stamps Certified Eligible Household	REC	Data Analysis And Publications Branch	МО	MASTER ONLY
TEMP 2133	Work Requirement Informing Notice	REC	Employment Program Bureau Bureau	МО	MASTER ONLY
TEMP 2139 ENG/SP	Welfare Reform Questions and Answers	REC	CalWORKs Eligibility Bureau	МО	MASTER ONLY

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FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified	
TEMP 2145	CalWORKs Monthly Child Care Eligibility Report	RSP	Child Care Programs	МО	MASTER ONLY	
TEMP 2145 SP	CalWORKs Monthly Child Care Eligibility Report	RSP	Child Care Programs	МО	MASTER ONLY	
TEMP 2156 ENG/SP	Foster Care May Owe You Money	REC	Foster Care	МО	MASTER ONLY	
TEMP 2160 REGION 1	State Law Changes Maximum Aid Payments	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY	
TEMP 2160 SP REGION 1	State Law Changes Maximum Aid Payments	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY	
TEMP 2160A REGION 2	State Law Changes Maximum Aid Payment (MAP) For Cash Aid Recipients	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY	
TEMP 2160A SP REGION 2	State Law Changes Maximum Aid Payment (MAP) For Cash Aid Recipients	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY	
TEMP 2173	New Cash Aid And Food STamp Rules Fingerprint Imaging And Photo Imaging	RSP	Food Stamp Bureau	МО	MASTER ONLY	
TEMP 2173 SP	New Cash Aid And Food STamp Rules Fingerprint Imaging And Photo Imaging	RSP	Food Stamp Bureau	МО	MASTER ONLY	
TEMP 2178 ENG/SP	Family Planning Stuffer	REC	Teen Programs	МО	MASTER ONLY	
TEMP 2179 MULTILINGUAL	Welfare May Owe You Money	REQ	Food Stamp Bureau	МО	MASTER ONLY	
TEMP 2181 MULTILINGUAL	Welfare May Owe Someone In Your Home Cash Or Food Stamps	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY	
TEMP 2182 MULTILINGUAL	Welfare May Owe Someone In Your Home Cash Or Food Stamps	REQ	CalWORKs Eligibility	МО	MASTER ONLY	
TEMP 2183	Got A Job? Flyer	REC	CalWORKs Eligibility Bureau	МО	MASTER ONLY	
TEMP 2183 SP	Got A Job? Flyer	REC	CalWORKs Eligibility Bureau	МО	MASTER ONLY	
TEMP 2187	"Timining Out" Questionnaire Stage One CalWORKs Child Care	REC	Data Systems And Survey Desing Bureau	МО	MASTER ONLY	
TEMP 2188 MULTILINGUAL	Maximum Family Grant Rule Has Changed	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY	
TEMP 2190 MULTILINGUAL	CalWORKs Retroactive Payment For Transportation	REC	Work Support Services	МО	MASTER ONLY	
TEMP 2193 ENG/SP	Notice To All Food Stamp Recipients - Important Please Read	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY	
TEMP 2193A ENG/SP	Notice To All Food Stamp Recipients - Important Please Read	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY	
TEMP AD 56A	Applications And Homes Approved For Adoptive Placements	RSP	Data Analysis And Publications Branch	МО	MASTER ONLY	
TEMP CA 60	Release Of Information-Financial Institution	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY	

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FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified
TEMP CA 237EA	Title IV-A Emergency Assistance (EA) Program Interim Caseload An Expenditures Report	REQ	Data Analysis And Publications Branch	МО	MASTER ONLY
TEMP CA 601	Checklist - Eligibility Simplification Project (ESP)	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
TEMP CW 101A	Immunization Currently Recommended For Children	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONY
TEMP CW 101A SP	Immunization Currently Recommended For Children	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
TEMP DFA 377.2A	Food Stamp Notice Of Expiration Of Certification	RSP	Food Stamp Policy Bureau	МО	MASTER ONLY
TEMP DFA 377.2A SP	Food Stamp Notice Of Expiration Of Certification	RSP	Food Stamp Policy Bureau	МО	MASTER ONLY
TEMP DFA 377.2B	Shelter Information For Recertification Of Food Stamps	RSP	Food Stamp Policy Bureau	МО	MASTER ONLY
TEMP DFA 377.2B SP	Shelter Information For Recertification Of Food Stamps	RSP	Food Stamp Policy Bureau	МО	MASTER ONLY
TEMP DFA 377.2C	Notice Of Action - Forms Not Received	RSP	Food Stamp Policy Bureau	МО	MASTER ONLY
TEMP DFA 377.2C SP	Notice Of Action - Forms Not Received	RSP	Food Stamp Policy Bureau	МО	MASTER ONLY
TEMP FS 16 REV. 1	Notice To All Food Stamp Recipients (9/22/96 Federal Food Stamp Law Changes)	RSP	Food Stamp Policy Bureau	МО	MASTER ONLY
TEMP FS 16 REV. 1 SP	Notice To All Food Stamp Recipients (9/22/96 Federal Food Stamp Law Changes)	RSP	Food Stamp Policy Bureau	МО	MASTER ONLY
TEMP NA 2	Food Stamp Change	RSP	Food Stamp Policy Bureau	МО	MASTER ONLY
TEMP NA 4	Important Notice For Cash Aid Recipients	RSP	CalWORKs Eligibility Bureau	МО	MASTER ONLY
TEMP NA 5	Important Notice For Cash Aid Recipients MAP Change/ Food Stamp Change	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
TEMP SOC 299	IHSS Request For Evaluation Of Need For Long-Term Medical Care	REC	Adult Services Management Bureau	PD	100 SH FREE
TEMP NA 1221	Notice Of Action - Retroactive Approval - Dominika v. Saenz	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
TEMP NA 1221 SP	Notice Of Action - Retroactive Approval - Dominika v. Saenz	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
TEMP NA 1222	Notice Of Action - Change - Dominika v. Saenz	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
TEMP NA 1222 SP	Notice Of Action - Change - Dominika v. Saenz	REQ	CalWORKs Eligibility Bureau	МО	MASTER ONLY
TEMP NA 1228	Notice Of Action - Payment Calculation	REC	CalWORKs Eligibility Bureau	МО	MASTER ONLY
TEMP NA 1228 SP	Notice Of Action - Payment Calculation	REC	CalWORKs Eligibility Bureau	МО	MASTER ONLY
TEMP NA 1229	Notice Of Action - Denial	REC	CalWORKs Eligibility Bureau	МО	MASTER ONLY
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REC= RECOMMENDED

FORM

AMOUNT PER ORDER UNIT ORDER **FORM** TITLE **REQ PROGRAM** only 100/50 SH per PD or BD unless otherwise specified NUMBER **RSP** CONTACT UNIT **REC TEMP NA 1229** Notice Of ACtion - Denial **REC** CalWORKs MO MASTER ONLY Eligibility Bureau MASTER ONLY TEMP SOC 329 **REC Adult Services** Form Letter To Recipient - IHSS Provider Invalid Social MO ENG/SP Management Security Number Bureau Children TEMP SOC 362 Office Of Child Abuse Prevention Exhibit A - Scope Of Work **REC** MO MASTER ONLY Services Branch **REC** Children TEMP SOC 363 Office Of Child Abuse Prevention Exhibit A - Scope Of Work MO MASTER ONLY Continued Services Branch Notice Of Action and Right To Request a State Hearing TEMP SSP 17 **REC Adult Services** EΑ **FREE** Management DA & A On Interim Assistance Bureau TEMP TCC 1772 Important Notice Transitional Child Care And Transitional Medi-Cal **REQ** Children MO MASTER ONLY Services Branch TLR 1 TrustLine Registry **REQ** Children SE .21 SE Services Branch TLR 1 SP TrustLine Registry **REQ** Children SE .21 SE Services Branch TLR 2 TrustLine Rigistry REQ Community Care SE .30 SE Licensing Program Development Bureau Community Care Licensing Program TLR 3 Trustline To Community Care Licensing Criminal Background REQ EΑ **FREE** Clearance Transfer Request Development Bureau Community Care Licensing To Trustline Crminal Backround Clearance Transfer Request Community Care Licensing Program TLR 4 **REQ** EΑ **FREE** Development Bureau WTW 1 Welfare To Work Plan Rights And Responsibilities **RSP** Employment MO MASTER ONLY Buréau RSP MASTER ONLY WTW 1 SP Employment MO Welfare To Work Plan Rights And Responsibilities Bureaus WTW 2 Welfare To Work Plan Activity Assignment RSP Employment MO MASTER ONLY Buréau **RSP** WTW 2 SP Welfare To Work Plan Activity Assignment Employment MO MASTER ONLY Bureau WTW 3 Welfare To Work Plan Activity Assignment Change **RSP** Employment MO MASTER ONLY Buréau WTW 3 SP Welfare To Work Plan Activity Assignment Change **RSP** Employment MO MASTER ONLY Buréau WTW 4 Notice To Other Parent **RSP** Employment MO MASTER ONLY Buréau WTW 4 SP Notice To Other Parent **RSP Employment** MO MASTER ONLY Bureau WTW 5 Welfare To Work Program Notice **REC Employment** MO MASTER ONLY Bureau WTW 5 SP Welfare To Work Program Notice **REC Employment** MO MASTER ONLY Buréau

FORM NUMBER	TITLE	REQ RSP REC	PROGRAM CONTACT	ORDER UNIT	AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless
					otherwise specified
WTW 6	Welfare To Work Exemption Request	REC	Employment Bureau	MO	MASTER ONLY
WTW 6 SP	Welfare To Work Exemption Request	REC	Employment Bureau	МО	MASTER ONLY
WTW 7	Welfare To Work Exemption Determination	REC	Employment Bureau	МО	MASTER ONLY
WTW 7 SP	Welfare To Work Exemption Determination	REC	Employment Bureau	МО	MASTER ONLY
WTW 8	Student Financial Aid Statement Welfare To Work Supportive Services	RSP	Employment Bureau	МО	MASTER ONLY
WTW 8 SP	Student Financial Aid Statement Welfare To Work Supportive Services	RSP	Employment Bureau	МО	MASTER ONLY
WTW 9	Welfare To Work Appraisal Appointment Letter	REC	Employment Bureau	МО	MASTER ONLY
WTW 9 SP	Welfare To Work Appraisal Appointment Letter	REC	Employment Bureau	МО	MASTER ONLY
WTW 10	Welfare To Work Third-Party Assessment	REC	Employment Bureau	МО	MASTER ONLY
WTW 10 SP	Welfare To Work Third-Party Assessment	REC	Employment Bureau	МО	MASTER ONLY
WTW 11	Welfare To Work/Cal-Learn Supportive Services Overpayment/Underpayment Notice	REC	Employment Bureau	МО	MASTER ONLY
WTW 11 SP	Welfare To Work/Cal-Learn Supportive Services Overpayment/Underpayment Notice	REC	Employment Bureau	МО	MASTER ONLY
WTW 12	Welfare To Work/Cal-Learn Supportive Service Repayment Agreement	REC	Employment Bureau	МО	MASTER ONLY
WTW 12 SP	Welfare To Work/Cal-Learn Supportive Service Repayment Agreement	REC	Employment Bureau	МО	MASTER ONLY
WTW 13	Welfare To Work/Cal-Learn Supportive Services Overpayment Final Notice	REC	Employment Bureau	МО	MASTER ONLY
WTW 13 SP	Welfare To Work/Cal-Learn Supportive Services Overpayment Final Notice	REC	Employment Bureau	МО	MASTER ONLY
WTW 15	Simplified Food Stamp Program Unpaid Work Experience (WEX) And Community Service Hours Worksheet	REC	Employment Bureau	МО	MASTER ONLY
WTW 16	Grant Based On The Job Training Participation: Voluntary Consent Form	RSP	Employment Bureau	МО	MASTER ONLY
WTW 16 SP	Grant Based On The Job Training Participation: Voluntary Consent Form	RSP	Employment Bureau	МО	MASTER ONLY

REQ= REQUIRED FORM NO

RSP= REQUIRED FORM SUBSTITUTE

REC= RECOMMENDED

CHANGE PERMITTED WITH PRIOR DSS APPROVAL **FORM** AMOUNT PER ORDER UNIT only 100/50 SH per PD or BD unless otherwise specified ORDER **FORM** TITLE REQ **PROGRAM NUMBER RSP** CONTACT UNIT REC

